

# HEAT PUMP REBATE FORM

NORTHERN  
WASCO  
COUNTY  
**PUD**  
PEOPLE'S UTILITY DISTRICT  
2345 River Rd.  
The Dalles, Or  
541-296-2226

Date: \_\_\_\_\_ PUD Acct #: \_\_\_\_\_ Request #: \_\_\_\_\_

## Name & address of person purchasing the heat pump (please print)

\* Name: \_\_\_\_\_ \*Phone: \_\_\_\_\_

\*Address: \_\_\_\_\_ \*City/State/Zip \_\_\_\_\_

## Name & address where heat pump is installed, if different from above

Name: \_\_\_\_\_ Phone \_\_\_\_\_

Address: \_\_\_\_\_ City/State \_\_\_\_\_

Year home was built \_\_\_\_\_ [ ] Site built [ ] Manufactured Home

Heating Equipment: \_\_\_\_\_

## Heating and Heat Pump Information

\*Previous heating Method \_\_\_\_\_ \*Heat Pump back-up fuel \_\_\_\_\_

\*Heat pump make and size \_\_\_\_\_ Permit #: \_\_\_\_\_

\*Heating Contractor: \_\_\_\_\_ \*Electrical Contractor: \_\_\_\_\_

\*Cost of heat pump & installation: \$ \_\_\_\_\_

Cost of new electric panel: \$ \_\_\_\_\_

**TOTAL COST:** \$ \_\_\_\_\_

**IMPORTANT: Be sure to include copy of the receipt**

How did you hear about the PUD's rebate program?

[ ] Newspaper [ ] Radio [ ] Friend

[ ] Retail Store [ ] Contractor

Other: \_\_\_\_\_

\* Information that must be completed before being considered for rebate.

\* Method of Payment:

\*Apply rebate to my electric account

\*Make rebate check payable to me.

I certify that this heat pump was purchased for installation at the above address. I will allow a PUD representative to verify installation of the heat pump.

X \_\_\_\_\_  
Buyers Signature

X \_\_\_\_\_  
PUD Representative's signature

Date: \_\_\_\_\_

Date: \_\_\_\_\_

### OFFICE USE ONLY

HSPF # \_\_\_\_\_ SEER # \_\_\_\_\_  
Inside # \_\_\_\_\_  
Outside # \_\_\_\_\_

### CRC Credit

\$ \_\_\_\_\_  
908.316

### PUD Office Use Only

Heat Pump \$ \_\_\_\_\_

Acct. 908.315 \$ \_\_\_\_\_

[ ] Inspected & model #'s verified.

X \_\_\_\_\_