

# Residential Lighting Rebate Application Form

MMU CUSTOMER INFORMATION (please print)

Customer name \_\_\_\_\_ Daytime phone number \_\_\_\_\_ Home phone number \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Installation Address (if different from above) \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**I am a:**     Owner/Occupant     Owner/Non-Occupant     Renter

### Please list all bulbs separately

	(A) Old bulb wattage *	(B) New bulb wattage	(C) Watts saved (A-B)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
	Column (C) total		

	(D) Old bulb wattage *	(E) New bulb wattage	(F) Watts saved (D-E)
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			
	Column (F) total		

\* If this rebate application is for new installation, enter the equivalent wattage replaced as listed on the bulb package.

**Total watts saved (Column C+F totals) \_\_\_\_\_ X \$ .20 per watt = \$ \_\_\_\_\_**

**Total purchase price of new bulbs \$ \_\_\_\_\_**

(Copy of receipt and new bulb packaging is required)

**REBATE TOTAL \$ \_\_\_\_\_**

(Lesser of the above amounts)

**Please apply rebate to my account** (Rebate totals less than \$100 will be credited the following month)

**Please send me a rebate check** (Budget Bill customers or rebates totaling \$100 or more) Please allow up to 6 weeks for reimbursement.

Customer Signature \_\_\_\_\_

Date \_\_\_\_\_

Approved By: _____	For office use only Date: _____	Acct # _____
<input type="checkbox"/> Credit Applied <input type="checkbox"/> Check Issued    # _____ / _____ / _____    Amount \$ _____		