



El Paso Electric Texas Residential & Income Qualified Solutions Program

EVAPORATIVE & REFRIGERATED COOLING REBATES Application Form

All applications are due 45 days after initial reservation.

1. EPE CUSTOMER INFORMATION

To be eligible for rebates, rebate forms may be mailed or emailed along with a copy of receipt or contractor invoice to the addresses below.

Mail: CLEAResult, PO Box 370301, El Paso, TX 79937 OR Email: epeincentives@clearesult.com

Rebate processing takes approximately 4–8 weeks. Terms and conditions subject to change without notice.

For any other questions, assistance in determining your building type, or providing the required information, contact an EPE Energy Efficiency Program Representative at (915) 255-4300, (915) 521-4488 or epeincentives@clearesult.com.

Rebates are determined by cooling ratings and size of cooling unit. Notification of unit eligibility will be given by email or phone.

Rebates will available through December 31, 2023 or upon funding availability.

Check if you are eligible for higher rebates at epesavings.com/Income-Eligibility

EPE Account Number for Install Location: (10 digits) _____

Customer/Resident Name: _____

Owner/Landlord name*: (if renter occupied) _____

Telephone: _____ Applicant's Email: _____

Account Address**: _____

City: _____ State: _____ ZIP: _____

Mailing Address: (if different) _____

City: _____ State: _____ ZIP: _____

Property Type: (Check one) Single Family Duplex Condominium Mobile Home Apartment

Property Status: (Check one) Owner Occupied Renter Occupied Vacant

* Rebate check will be made out to landlord if entered

** Rebate check will be mailed to the account address unless a different mailing address is provided

Home Characteristics

Please provide photo of heating system nameplate for homes with Electric Resistance or Heat Pump heating

Existing Cooling System Age:

Existing Cooling Type: Refrigerated Air Evaporative Cooling None

Existing Heating Type: Gas Electric Resistance Heat Pump None

Existing Water Heater Type: Gas Electric Resistance Heat Pump None

2. INSTALLATION INFORMATION (Must complete all fields)

Evaporative Cooling Please provide photo of installed system nameplate or include system model # on invoice

Project Completion Date: _____ Reservation Number: _____

Manufacturer	Brand Name #	Model #	Serial #

Refrigerated Cooling Please provide photo of installed system nameplate or include system model # on invoice

Project Completion Date: _____ Reservation Number: _____

Manufacturer	Condenser Model #	Evaporative Coil Serial #	AHRI Reference #

Look up AHRI certificate at www.ahridirectory.org

3. CONTRACTOR INFORMATION

(OPTIONAL) Property owner must complete only if rebate is to be issued to contractor

Company Name: _____ License #: (if applicable) _____

Contact Person: _____ Phone: _____

4. APPLICANT ACKNOWLEDGEMENT

Please refer to epelectric.com/tx/residential/energy-efficiency for additional information regarding eligibility criteria. (Must be signed by EPE customer if owner occupied or landlord if renter occupied)

By signing below, I acknowledge that: (1) the measure installation listed herein has been installed to my satisfaction; (2) if contacted by EPE or CLEAResult, I agree to allow access to my property to inspect the measure installation; (3) neither EPE nor CLEAResult assumes any liability whatsoever relating to the measure installation or performance; (4) all information provided in this rebate form is accurate to the best of my knowledge and (5) I acknowledge that the project would not have been accomplished or would have been completed with a lower level of efficiency without the assistance of the EPE Energy Efficiency Program.

Applicant Signature: _____ Date: _____

5. PAYMENT RELEASE AUTHORIZATION

(OPTIONAL) Property owner must complete and sign only if rebate is to be issued to contractor.

By signing below, I am authorizing the payment of the rebate to the contractor (named below), and I understand that I will NOT be receiving the incentive payment from El Paso Electric.

Applicant Signature: _____ Date: _____

Contractor Company Name: (for payment) _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____