

Unitil Low Income Program Rebate Reservation Form (Optional)



INSTRUCTIONS: To reserve a rebate, please complete all sections of this form and send to the address below.

SECTION 1: Customer/Property Information

Building Owner Name:		Date	
Property Name:			
Site Address, Town, Zip:			
Mailing Address, Town, State, Zip:			
Email Address:			
Phone Number:		# Residential Units in Building:	
Efficiency Maine Natural Gas Trade Ally:			

Check the boxes and sign below if accurate:

- The heating system will be new, fueled by Unitil gas, and have an AFUE rating 94% or higher.
- No other Efficiency Maine incentive program has or will be used for this heating system.
- This is a residential property served by Unitil.
- I have attached a quote for the heating system upgrade showing the make and model of the boiler/furnace.
- I have attached records showing the previous twelve months of heat energy usage. The annual usage is: _____ CCF
- I understand that the rebate will equal one dollar per CCF equivalent of energy used per year. The rebate reservation requested equals: \$_____
- Building has at least 66% LIHEAP eligible tenants. If single family home, proof of LIHEAP participation is attached.
- I understand that this reservation will be valid for 90 days from the time of approval.

I certify that all statements made above are correct.

Owner's Signature: _____ Date: _____