



Office Use Only
 Rebate:
 Month/Year:

Rebate Assignment

This form must accompany completed rebate application(s) and/or required documentation.
 Payee and Member must sign/date. All information is required to process rebate(s).

MEMBER INFORMATION					
Account # (required)				Date	
First Name			Last Name		
Site Address			Phone		
City			State	Zip	
Mailing Address (if different than site address)			Contact Email		
City			State	Zip	

REBATE INFORMATION	
Installed Measure(s)	
Estimated Rebate Amount	\$

REBATE PAYABLE TO					
Name			Relationship to Member		
Mailing Address			Contact Email	Phone	
City			State	Zip	
Phone			Fax		

PAYEE SIGNATURE _____ **DATE** _____

By signing above, payee certifies that the installation was completed according to Hood River Electric Internet Co-op (HR Co-op) specifications. Payee understands that they are responsible for meeting all program standards and that payment is not due until program standards are met. By signing this agreement, the member acknowledges that the measure(s) are installed and operating at the location indicated. The member agrees to allow HR Co-op or it's representative to perform inspections on the work. The member also certifies that the work was completed within HR Co-op service territory. The member agrees to release HR Co-op from any liability associated with the completed work and recognizes that in no way is HR Co-op responsible for the safety or satisfactory performance of this work. HR Co-op will not accept any liability caused by the member's participation in this program.

MEMBER SIGNATURE _____ **DATE** _____

Allow 8 to 10 weeks for rebate processing after final inspections and receipt of all the required paperwork.