

Summer is just around the corner!

\$75⁰⁰ REBATES

on Air Conditioner Tune-ups

Dozens of other rebates for 2022

Residential & Commercial



AC tune-ups & maintenance will help to keep your central air conditioning unit running at top efficiency, prevent failures & extend the life of the equipment. A tune-up by a service professional can improve the unit efficiency by as much as 20%.

*Must be performed by a qualified service professional and meet the specifications listed in the 2022 CBPU Residential Application. Must also provide an invoice. Please visit www.coldwater.org or contact the CBPU for full details at 517.279.9531

Contact Information

Customer Name	Phone	Email	
Mailing Address	City	State	ZIP Code
Installation Address	City	State	ZIP Code
CBPU Account Number	How did you learn about the program? <input type="checkbox"/> website <input type="checkbox"/> flyer/brochure <input type="checkbox"/> event <input type="checkbox"/> contractor <input type="checkbox"/> newspaper <input type="checkbox"/> radio		
Name of Installing Contractor	Phone	Email	
Contractor Address	City	State	ZIP Code

Incentive Documentation

Measure	Specs	Quantity	Incentive	Total Incentive (Quantity x Incentive)												
Central AC Tune-up	Limit One (1)	1	\$75.00	\$75.00												
*A comprehensive AC tune-up should include the following checklist items: <table style="width:100%; border:none;"> <tr> <td><input type="checkbox"/> Check voltage</td> <td><input type="checkbox"/> Check thermostat operation & control sequence</td> <td><input type="checkbox"/> Perform visual inspection of entire AC system</td> </tr> <tr> <td><input type="checkbox"/> Inspect & lubricate blower</td> <td><input type="checkbox"/> Check coolant level & pressure</td> <td><input type="checkbox"/> Confirm proper air flow</td> </tr> <tr> <td><input type="checkbox"/> Clean, inspect & lubricate motors</td> <td><input type="checkbox"/> Clean or replace air filter</td> <td><input type="checkbox"/> Inspect belt condition</td> </tr> <tr> <td></td> <td></td> <td><input type="checkbox"/> Clean & inspect condenser coil</td> </tr> </table>					<input type="checkbox"/> Check voltage	<input type="checkbox"/> Check thermostat operation & control sequence	<input type="checkbox"/> Perform visual inspection of entire AC system	<input type="checkbox"/> Inspect & lubricate blower	<input type="checkbox"/> Check coolant level & pressure	<input type="checkbox"/> Confirm proper air flow	<input type="checkbox"/> Clean, inspect & lubricate motors	<input type="checkbox"/> Clean or replace air filter	<input type="checkbox"/> Inspect belt condition			<input type="checkbox"/> Clean & inspect condenser coil
<input type="checkbox"/> Check voltage	<input type="checkbox"/> Check thermostat operation & control sequence	<input type="checkbox"/> Perform visual inspection of entire AC system														
<input type="checkbox"/> Inspect & lubricate blower	<input type="checkbox"/> Check coolant level & pressure	<input type="checkbox"/> Confirm proper air flow														
<input type="checkbox"/> Clean, inspect & lubricate motors	<input type="checkbox"/> Clean or replace air filter	<input type="checkbox"/> Inspect belt condition														
		<input type="checkbox"/> Clean & inspect condenser coil														
Central AC Manufacturer:	Central AC Model Number:	Central AC Serial Number:														

Certifications & Signature

I hereby certify that: 1. The information contained in this application is accurate and complete. 2. All rules of this incentive program have been followed. 3. I have read and understand the Terms and Conditions included with this document. I agree to verification of equipment installation which may include a site inspection by a Coldwater Board of Public Utilities representative. I understand that I am not allowed to receive more than one incentive from this program for any one piece of equipment. I hereby agree to indemnify, hold harmless and release the utility from any actions or claims in regard to the installation, operation and disposal of equipment (and related materials) covered herein, including liability from any incidental or consequential damages. I understand that my submittal of the requested information is for the sole purpose of my program participation. I further understand that this information will be treated as confidential to the extent permitted by law.

Customer Signature	Print Name	Date Submitted

- Thank you for your participation. Please return this form with an invoice via: mail, email, fax, or in person. (see contact info. to the right)

For Internal Use Only

Date Received	Post Inspection	Incentive Approval	Date Approval
	Post inspection required? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	
	Account Number: 975.000.7705	Amount: \$	



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