

# APS Energy Efficient Pools Rebate Program

## Pool Pump Rebate



### APS Customer Information

APS Account Number (see the top right corner of your APS bill):

Customer Name (as it appears on utility bill)

Name of Mobile Park or Apartment Complex

Installation Address

Apt #

City

State

Zip Code

Mailing Address (if different from installation)

Apt #

City

State

Zip Code

Contact Name (if different from Customer)

Contact Phone

E-mail

#### Did you remember to:

Complete all sections at right?

Submit copy of invoice with rebate form?

For program questions  
please call:  
**(800) 230-8904**

*This program is funded by APS customers and is approved by the Arizona Corporation Commission.*

### Terms and Conditions/Rebate Assignment Authorization

I certify that I am an APS customer, at the address identified above where the pool pump for which I am applying for a rebate will be installed. I further certify that I have read and understand all program requirements, terms, and conditions. I also agree that the Contracting Company who installs the pump and performs any other services on my property associated with this rebate application is solely responsible for the performance of their work. It is understood and agreed that the party from whom I am purchasing the pool pump and the contracting company are not agents, servants, or employees of APS. I hereby indemnify and hold harmless APS, its officers, directors, employees, agents, representatives, affiliates, successors, and assigns from any liability cost, or expense, including reasonable attorney's fees and legal costs, arising out of or resulting from the pool pump and the contracting company's performance of services.

I hereby authorize APS to transfer any rebate that I may be entitled to under the Energy Efficient Pools Rebate Program directly to the third party named below from whom I purchased the pool pump. The third party will discount the price of the pool pump by the amount of the rebate that is being transferred. I understand that I will receive no additional rebates or incentives from APS. I certify that all information provided herein is accurate to the best of my knowledge, that APS may verify the accuracy of all information, and that all installations are subject to random inspections by APS or an authorized third party. By signing below, the pool contracting company certifies that they have reviewed the customer's APS bill to confirm that this installation is eligible to receive a rebate at the address shown above.

APS Customer Signature

Date

Third Party Company Name

Company Representative Signature

# Pool Pump Rebate

*NOTE: All variable speed pool pumps must be calibrated after installation and calibration report must be submitted.*

Rebate application and calibration report must be submitted within 6 months of pump purchase date (as per the invoice) to be eligible for payment. Program funded by APS customers and approved by the Arizona Corporation Commission.

## Program Terms & Conditions

You must be an APS residential electric customer.

Pool must be located in APS' service territory.

Pump must be installed on a single family residential, in-ground swimming pool.

Pump must be a qualifying new unit (Rebuilt motors do not qualify).

Limit one pump rebate per household.

Pumps installed before January 14, 2010 will not qualify for this program.

The program will end when funds expire.

## Required Pool Pump Rebate Information

### New Pump Information:

\_\_\_\_\_  \_\_\_\_\_

Sale Date

**TYPE OF PUMP:**  Two Speed (\$100)  Variable Speed (\$200 rebate)

Manufacturer \_\_\_\_\_ Serial Number \_\_\_\_\_

Model Number \_\_\_\_\_ Installation Date \_\_\_\_\_

Retailer \_\_\_\_\_ Total Pool Pump Cost \_\_\_\_\_

\_\_\_\_\_  \_\_\_\_\_

Horsepower (H.P.)

**ARE YOU REPLACING AN EXISTING POOL PUMP?:**  Yes  No (If YES, please complete the following section.)

### Existing Pump Information:

(Fill out this information about the pump being replaced. For new builds or situations where information on existing pool equipment cannot be identified, indicate "N/A" for "not applicable").

Manufacturer \_\_\_\_\_ Name of Installing Contractor \_\_\_\_\_

Model Number \_\_\_\_\_ Contractor Address \_\_\_\_\_

Horsepower (H.P.) \_\_\_\_\_ Phone \_\_\_\_\_

Age (years) \_\_\_\_\_

### Pool Information:

Pool Size (gallons) \_\_\_\_\_

**AVERAGE DAILY POOL PUMP RUN TIME:**

OLD PUMP	SUMMER _____ hrs/day (APRIL 1 – SEPT 30)	WINTER _____ hrs/day (OCT 1 – MARCH 31)
	NEW PUMP	NEW PUMP
	SUMMER _____ hrs/day (APRIL 1 – SEPT 30)	WINTER _____ hrs/day (OCT 1 – MARCH 31)