

Commercial Solar Heating Rebate Application

Please complete all sections



NAME OF BUSINESS / INSTITUTION		CONTACT PERSON	
INSTALLED ADDRESS		POSTAL CODE	
APPLICANT MAILING ADDRESS (IF DIFFERENT FROM ABOVE)		POSTAL CODE	
EMAIL		TELEPHONE #	
DEALER NAME	DEALER TELEPHONE#	DEALER EMAIL	
PANEL MAKE	PANEL MODEL #	# PANELS	INSTALLED COST (incl. HST)
PANEL USED TO HEAT			
<input type="radio"/> Air – Space heating <input type="radio"/> Water – Domestic water <input type="radio"/> Water – Space heating <input type="radio"/> Water - Both			
PLEASE CHECK EACH CIRCLE TO INDICATE COMPLIANCE/AGREEMENT			
<input type="radio"/> I agree to a random inspection by Efficiency Nova Scotia, or its agents, of my solar thermal system. <input type="radio"/> I am the registered owner of the business/institution where the system is installed. <input type="radio"/> Water pipes have been insulated as per program requirements. <input type="radio"/> Photos of the installed system (collectors and indoor components) have been included. <input type="radio"/> Legible copies of receipts for the system installed at the address indicated above have been included. <input type="radio"/> All of the information on this form is true and accurate to the best of my knowledge.			
APPLICANT SIGNATURE		DATE	

MAIL APPLICATION TO:

**Solar Rebate, 230 Brownlow Ave, Suite 300,
Dartmouth, NS, B3B 0G5**

Please allow 8 weeks for your application to be processed.

FOR OFFICE USE ONLY

Date:

Initials:

Rebate Amount: