

# Commercial Pool Rebate Claim Form



Project ID: \_\_\_\_\_

## SITE INFORMATION

Site type:  Retrofit  New construction  
Sector type:  Multifamily  Commercial  Government/nonprofit  
Business name: \_\_\_\_\_  
Address: \_\_\_\_\_

## GAS ACCOUNT INFORMATION

Account number: \_\_\_\_\_ Meter number: \_\_\_\_\_

## HOST CUSTOMER INFORMATION

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## SYSTEM OWNER INFO Same as host customer

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## CONTRACTOR INFORMATION Self-installer

Company name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## SELLER INFORMATION Same as contractor

Company name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_  
Email: \_\_\_\_\_

## PAYEE INFORMATION

Send the rebate check to the following:

Host customer  System owner  Contractor

Other - name and address: \_\_\_\_\_

Tax status (choose one below):

Sole proprietor  Partnership  L.L.C. (corporation)  L.L.C. (noncorporation)  Corporation  Exempt  Individual

Taxpayer ID: \_\_\_\_\_

## PROJECT COST INFORMATION

Collector cost: \_\_\_\_\_  
Tank cost: \_\_\_\_\_  
Permit cost: \_\_\_\_\_  
All other costs: \_\_\_\_\_  
Total project cost: \_\_\_\_\_

Total project cost: \_\_\_\_\_  
Total other rebates: \_\_\_\_\_  
Estimated rebate: \_\_\_\_\_  
(Please attach print out from [csithermal.com/calculator](http://csithermal.com/calculator))  
Total out-of-pocket costs: \_\_\_\_\_

Email: [swhp@longbeach.gov](mailto:swhp@longbeach.gov) - Please do not send as zip file

Mail: See Section 10 of the Handbook | Fax: (858) 244-1178

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## EQUIPMENT INFORMATION

Collector OG-100 number: \_\_\_\_\_ OG-100 model number: \_\_\_\_\_  
Manufacturer: \_\_\_\_\_ Number of collectors: \_\_\_\_\_  
Total collector area: \_\_\_\_\_ Number of collectors per flow path: \_\_\_\_\_  
Pool set point temp: \_\_\_\_\_ Pool surface area: \_\_\_\_\_  
Tilt: \_\_\_\_\_ Azimuth: \_\_\_\_\_  
Shade factor: \_\_\_\_\_ Estimated annual savings: \_\_\_\_\_

Flow type:

Direct  Indirect

Freeze protection:

Automatic drainback  Glycol (cannot be selected if flow type is indirect)

Overheat protection:

Drainback system, no overheat protection needed  Advanced controller with a vacation or holiday mode

Heat dump radiator  Advanced controller with a thermal cycling function

Steam back  Pressure stagnation protection (PSP)

Unglazed collectors  Other (please attach information)

Does this project have multiple arrays?

No  Yes Number: \_\_\_\_\_

Climate zone: \_\_\_\_\_

Back-up fuel source: \_\_\_\_\_

\_\_\_\_\_  
Customer name (print)

\_\_\_\_\_  
Customer signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

\_\_\_\_\_  
Contractor name (print)

\_\_\_\_\_  
Contractor signature (self-installers must sign here as well)

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

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