

*Mt. Wheeler Power's Member
Rebates for Compact
Fluorescent Light Bulbs
Application*



Completely fill out each section. Incomplete forms will not be processed. Make a copy of this application for your records. Include the application and a copy of your itemized sales receipt and mail to: **Mt. Wheeler Power—Rebate Program, PO Box 151000, Ely, NV 89315.**

Mt. Wheeler Power Account Number: _____
Name (on account): _____
Service Address: _____ City: _____ State: _____ Zip: _____
Mailing Address: _____ City: _____ State: _____ Zip: _____
Phone Number: _____
Email Address: _____ (Optional)

Fill In The Following Information For The Incentive Requested (Required):

COMPACT FLUORESCENT LIGHT BULBS - \$1.00 per bulb - Max \$25.00 every 24 months

Store Purchased: _____
Date Purchased*: _____
of CFL's Purchased: _____

*Purchase Date Must be after 1/12/09

I hereby certify that I am a Mt. Wheeler Power member. I certify that all information on this form is accurate. I agree to all terms and conditions for participation in this program. I acknowledge that Mt. Wheeler Power will make the final determination of any incentive that I will receive and may verify all the information provided. Policy 6.10 "Member Rebates For Energy Efficiency" is subject to change or cancel without notice, rebate funds are limited to an amount set forth by Mt. Wheeler Power Board of Directors. Mail this completed form and copy of receipts to: **Mt. Wheeler Power—Rebate Program, PO Box 151000, Ely, NV 89315.**

Customer Signature: _____ Date: _____