

1. Builder Information

Enrollment Number _____

Builder _____ Contact Person _____

Street _____ City _____ State _____ ZIP _____

Office Phone _____ Cell Phone _____ Fax _____

Email Address _____

2. Property Information

Street _____ City _____ State _____ ZIP _____

Lot _____ Block _____ Subdivision _____

Plan# _____

3. Equipment Information

REQUIRED

Water Heater _____ Energy Factor (EF) _____ Gallons _____

Primary Heat Source _____ AFUE _____ Manufacturer _____

Heat Source _____ AFUE _____ Manufacturer _____

To help us develop new conservation programs, please check the other natural gas appliances used at your home.

- | | | | |
|-------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Furnace | <input type="checkbox"/> Cooking | <input type="checkbox"/> Generator | <input type="checkbox"/> Natural Gas Grill |
| <input type="checkbox"/> Gas Lights | <input type="checkbox"/> Dryer Extra \$100 | <input type="checkbox"/> Space Heater | <input type="checkbox"/> CNG Compressor |
| <input type="checkbox"/> Hot Water | <input type="checkbox"/> Gas Logs | <input type="checkbox"/> Pool Heater | <input type="checkbox"/> Other: _____ |

Please provide the following rater information:

Company Name _____ Contact Name _____

Street _____ City _____ State _____ ZIP _____

Office Phone _____ Cell _____ Fax _____

Email Address _____

The following must be submitted to Oklahoma Natural Gas with the rebate application within 90 days following final inspection:

- 1) Signed, completed rebate application
- 2) Certified RESNET Home Energy Rater will provide to Oklahoma Natural Gas:
 - a. Energy Verification Summary
 - b. Invoice
 - c. Energy Sticker (must have a HERS rating of 70 or less)

The completed rebate application, along with the copies of the information listed above, must be mailed or emailed to:

Oklahoma Natural Gas Company
New Home Program Rebates
Energy Efficiency Department
401 N. Harvey Avenue
Oklahoma City, OK 73102
(405) 551-6565

OR

ONGNewHome@onegas.com

4. Terms and Conditions

1. As you decide whether to participate in Oklahoma Natural's Energy-Efficiency Program, please review the following terms and conditions.
2. Oklahoma Natural is not responsible for any decision regarding the selection of equipment to qualify for rebates under our Energy-Efficiency Programs. Just as the decision whether to participate in our Energy-Efficiency Program is one each customer must make based on his or her own circumstances, so too is any decision about how that customer participates. OKLAHOMA NATURAL DOES NOT MAKE AND HEREBY DISCLAIMS ANY WARRANTY CONCERNING THE MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE FOR ANY EQUIPMENT CHOICE THE CUSTOMER MAKES. The customer is responsible for the full cost and installation of any equipment.
3. Oklahoma Natural is not responsible for any decision about which licensed and qualified contractor the customer selects. Oklahoma Natural encourages its customers to carefully research and select an Oklahoma-licensed plumber or heating, ventilation, and air conditioning (HVAC) contractor to install qualifying equipment. Oklahoma Natural is not responsible for any damage caused when (a) a contractor enters a customer's premises or during installation, (b) by poor workmanship or (c) failure to complete projects. Oklahoma Natural will not intervene in disputes between a customer and his or her selected contractor. Oklahoma Natural also strongly encourages participating customers to be sure any installation conforms to all applicable codes, permit requirements and manufacturer installation recommendations and requirements. Oklahoma Natural is not responsible for determining whether a customer's appliances are installed correctly or safely. In the event you believe an appliance is unsafe or you detect the odor associated with natural gas, you agree to immediately call 800-458-4251.
4. The Department of Energy and others provide information on projected energy savings for different types of appliances and installations. Oklahoma Natural makes no warranty concerning the accuracy of this information or whether the devices the customer selects will accomplish the projected energy and cost savings.
5. Oklahoma Natural Gas requires each customer to present a completed rebate application and is unable to process incomplete applications. It is the responsibility of the customer to ensure the contractor has completed and signed the application. Applications and additional information are available at OklahomaNaturalGas.com/Rebates. Oklahoma Natural reserves the right to verify all information provided. Oklahoma Natural Gas issues rebates in the form of checks, not utility credits. The Company is not responsible if the dealer/installer or retailer fails to provide accurate information about the amount of a rebate or eligibility. Rebate checks will be mailed approximately six to eight weeks after approval subject to availability of program funds.
6. This program is available to any Oklahoma Natural Gas current or prospective customer. Rebates are only available to active customers of Oklahoma Natural Gas in an individually metered residential home. Only qualified natural gas equipment will be considered for a rebate. Oklahoma Natural encourages each customer to review all program eligibility and requirements.
7. Completed rebate applications will be reviewed and processed by Oklahoma Natural Gas on a first-come, first-served basis until program funds are depleted. Rebate qualifications and amounts are subject to change. Rebate funds are limited. Funding guidelines for these programs may be changed or discontinued at any time without notice. Please check program website for updates at OklahomaNaturalGas.com/Rebates.

5. Acceptance of Terms

REQUIRED

I hereby certify that all information is accurate, including claims of customer and equipment information. My signature below indicates I have read, understand and agree to all terms and conditions on this application and acknowledge that Oklahoma Natural Gas may verify all the information provided.

BUILDER SIGNATURE REQUIRED _____ **DATE** _____