

Efficient Product Rebates After You Buy

Complete this application if your business has purchased and installed qualifying products within the last 90 days.

Business Information

Business Name:	
Business Contact Name:	Position:
Phone:	Fax:
Contact Email:	
<input type="checkbox"/> I would like to receive email communications (tips, promotions, etc.) from Efficiency Nova Scotia. You may withdraw consent at any time.	
Mailing Address:	
City/Town:	Postal Code:
Address where products were installed (if different from above):	
City/Town:	Postal Code:

Installation Information

Is this project? (check one):	<input type="checkbox"/> New Construction	<input type="checkbox"/> Existing Building Retrofit
Date Products Installed:		
Company Installing Products:		
Installer Contact Name and Title:		
Installer Phone:		
Installer Email:		

Without any assistance from Efficiency Nova Scotia, would you:		
Install any energy efficient equipment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Install significantly less energy efficient equipment?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Postpone the installation of equipment by more than two years?	<input type="checkbox"/> Yes	<input type="checkbox"/> No

How would you like your rebate?

<input type="checkbox"/> Direct Deposit	Attach a void cheque or a direct deposit form from your bank to have your rebate deposited directly into your account.
<input type="checkbox"/> Cheque	Complete the information below to have your rebate sent to you as a cheque.
Make cheque payable to:	

Where would you like your cheque sent?

<input type="checkbox"/> Company Address	<input type="checkbox"/> Facility Address	<input type="checkbox"/> Other (please fill below)
Mailing Address:		
City/Town:		Postal Code:

By checking below, you agree to the terms and conditions, www.energycyns.ca/business/consent and confirm the account information provided is complete and accurate. If you check "I Agree" and you have not read the terms, then you are still agreeing to be bound by the terms.

I Agree

Name: _____

Title: _____

Complete your application

**Send the following documents with your application.
Check each box once you enclose each item.**

- This fully completed rebate application
- An official detailed invoice (see invoice guidelines for what's required)
- Completed worksheet(s) for the products you installed;
- A copy of a recent electric bill

Send your fully completed application and all required documents to:

Email:

rebates@energycyns.ca

(please note that we cannot accept high-risk attachments such as ZIP, EXE or files that exceed 10MB).

Fax:

902 470 3599

Attention: Rebates

Mail:

Efficiency Nova Scotia
230 Brownlow Avenue
Suite 300
Dartmouth, NS B3B 0G5
Attention: Rebates