



Washington		ppiidatio	··			
Applicant Name (First, Last)	Installatio	tallation Address Unit/Apt/Complex Name City Zip Code				
Rebate Check Payable To	Name) Email Add	Email Address Mailing Address				
	Mailing A					
Primary Phone	City	Zip Code				
Manufacturer Name	Purchase	Price (unit)	Dat	Date of Purchase		
Model	Dealer Na	aler Name & Address				
 be a city wa attach the a submit this *Original receipt may be red I certify that I have purchas previously received or ap	this rebate, you must: ater customer and pay original proof of purch application within 90 turned upon request after the appli	days of pocation has been a for installation above the ridentified above.	pt) to this urchase processed a processed a at the location	s applicat on indicated a	and I have i	nt reserves
	ormation is true and correct.		<i>,</i>			
Applicant Signature				Date		
	FOR OFF	CE USE ONLY	, <u> </u>			
Rebate Approved? Yes No	Signature			Date		
Account	Qualifying Rebate Amount \$					

Send application and copy of receipt to Tony Donati, Public Works Engineering, City of Kent, 220 4th Ave. S., Kent, WA. 98032