



**ACCOUNT INFORMATION**

ACCOUNT NO: \_\_\_\_\_ APPLICATION DATE: \_\_\_\_\_  
CUSTOMER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_  
BILLING ADDRESS: \_\_\_\_\_  
SERVICE ADDRESS (IF DIFFERENT): \_\_\_\_\_  
EMAIL: \_\_\_\_\_

**CONTRACTOR INFORMATION**

CONTRACTOR: \_\_\_\_\_ PHONE: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_  
FEDERAL TAX ID NO: \_\_\_\_\_

**EQUIPMENT REMOVED FROM PROPERTY**

CIRCLE TYPE: HWH FURNACE BOILER OTHER:  
MANUFACTURER: \_\_\_\_\_ MODEL NO: \_\_\_\_\_  
SERIAL NO: \_\_\_\_\_ AFUE RATING: \_\_\_\_\_  
APPROXIMATE AGE: \_\_\_\_\_ FUEL: \_\_\_\_\_

**EQUIPMENT REMOVED FROM PROPERTY**

CIRCLE TYPE: HWH FURNACE BOILER OTHER:  
MANUFACTURER: \_\_\_\_\_ MODEL NO: \_\_\_\_\_  
SERIAL NO: \_\_\_\_\_ AFUE RATING: \_\_\_\_\_  
APPROXIMATE AGE: \_\_\_\_\_ FUEL: \_\_\_\_\_

**NEW NATURAL GAS EQUIPMENT INSTALLED AT THE PROPERTY**

CIRCLE TYPE: HWH FURNACE BOILER OTHER:  
MANUFACTURER: \_\_\_\_\_ MODEL NO: \_\_\_\_\_  
SERIAL NO: \_\_\_\_\_ AFUE RATING: \_\_\_\_\_  
DATE INSTALLED\*: \_\_\_\_\_ FUEL: \_\_\_\_\_  
BTU RATING: \_\_\_\_\_ MEASURE: \_\_\_\_\_

**NEW NATURAL GAS EQUIPMENT INSTALLED AT THE PROPERTY**

CIRCLE TYPE: HWH FURNACE BOILER OTHER:  
SERIAL NO: \_\_\_\_\_ AFUE RATING: \_\_\_\_\_  
DATE INSTALLED\*: \_\_\_\_\_ FUEL: \_\_\_\_\_  
BTU RATING: \_\_\_\_\_ MEASURE: \_\_\_\_\_

**NEW NATURAL GAS EQUIPMENT INSTALLED AT THE PROPERTY**

CIRCLE TYPE: HWH FURNACE BOILER OTHER:  
MANUFACTURER: \_\_\_\_\_ MODEL NO: \_\_\_\_\_  
SERIAL NO: \_\_\_\_\_ AFUE RATING: \_\_\_\_\_  
DATE INSTALLED\*: \_\_\_\_\_ FUEL: \_\_\_\_\_  
BTU RATING: \_\_\_\_\_ MEASURE: \_\_\_\_\_



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CALCULATE YOUR REBATE

EQUIPMENT

Table with 2 columns: Equipment description and Amount. Items include Furnace AFUE ≥ 90 w/ECM (\$1,000), Water Boiler AFUE ≥ 90 (\$1,000), Steam Boiler AFUE ≥ 82 (\$1,000), Boiler Reset Controls\* (\$200), Tankless HWH EF ≥ 0.82 (\$400), Storage HWH EF 0.67 to 0.81, 40 gal min. (\$200), Refer-a-friend (\$100), Gas Stove (\$75). Total Rebate Request is \$5,000.

\*Must be installed at time of boiler installation.

APPLICATION CHECKLIST

- Attach a copy of the installer's invoice showing the make, model, serial number of all qualifying equipment and date of installation with this completed form.
Attach a copy of a paid receipt/proof of purchase and proof of ownership
Attach proof of the AFUE rating by the manufacturer or other certifying body
Make a copy of all submitted documents for your records

Mail completed, signed applications and all corresponding documents to:

Leatherstocking Gas, 498 S Main St, Suite C, Montrose, PA 18801

OR email completed application and corresponding materials to: vcalby@leatherstockinggas.com

Please allow 4-6 weeks for your rebate to be processed. Your rebate will appear as a credit on your bill.

Program subject to change or end at any time at the discretion of Leatherstocking Gas.

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_