

Residential Tree Power Rebate Application Form

Use the form below to fill in your RPU account information and required information about the rebate program you are applying for. Once you've completed the form, PRINT THE FORM, SIGN IT, and submit it with all applicable receipt copies and required information within 90 days of purchase to:

Riverside Public Utilities - Programs & Services - 3750 University Ave. - 3rd Floor - Riverside, CA 92501 Or e-mail RPURebates@riversideca.gov

Failure to provide complete customer information, signature(s), model numbers, or receipt copies may result in processing delays.

Please allow 4-6 weeks for processing. Rebates will appear as a credit on your RPU billing statement.

The TREE POWER shade tree incentive program is open to Riverside Public Utilities ELECTRIC customers ONLY.

Maximum of 5 shade trees per customer, per year. Complete program rules and guidelines at GreenRiverside.com

| Customer Information | | | | | |
|---|-------------------------------------|--------------------------------------|---|---|--------------|
| Name on Utility Account | | Account # | | | |
| Installation Address | | Zip Code | | Phone | |
| Mailing Address (If different) | | E-mail | | | |
| Tree Species & Merchant Information | | | | | |
| Date Bought Merchant(s) Purchased From | | Tree Species F | Planted | | |
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| I the undersigned, agree that any and all trees which I obtain through the Tree understand that I will care for the trees and be fully liable for any damage to pof the tree(s), or is in any way related to my receipt of the tree(s) under the Tree City of Riverside, its officers, employees and agents from any damages related. | erson or propert ree Power Rebat | y which may be o e Program. I fur | caused by the plar ther agree to inder | nting, maintenance a mnify and hold harm | and presence |
| Signature of Applicant | Date | | | | |
| Signature of Owner | Date | | | | |

FOR OFFICE USE ONLY

| JL Key | 6020109080 | Object | 45603800 | Rebate Amoun | t | |
|---------|----------------------|--------|----------------------|--------------|-------------------------|--|
| | Certification of Del | ivery | Approved for Payment | | Approved for Payment | |
| | | | | | | |
| Signatu | ire Date | e | Department Head | Date | Finance Department Date | |