



**COMPLETE AND MAIL THE RESIDENTIAL REBATE FORM TO:  
Fort Pierce Utilities Authority – 206 S. 6<sup>TH</sup> Street, Fort Pierce, FL 34950  
772-466-1600**

**Customer Information**

Name \_\_\_\_\_ FPUA Account # \_\_\_\_\_  
Account Holder

Mailing Address \_\_\_\_\_

Installation Address \_\_\_\_\_

Phone # \_\_\_\_\_ Email \_\_\_\_\_ Signature \_\_\_\_\_

(I agree to the qualifications and terms listed below)

**Reimbursement Method:**

- Credit on account
- Donation to Project Care

**Check One:**

- Owner Occupied
- Renter Occupied
- Landlord

Participation in this program does not guarantee that you will receive a rebate. Form must be completed and recorded by FPUA within 30 days of install. Due to the limited amount of rebate funds, rebates will be on a first-come, first-served basis. This program will end on September 30, 2024, or when the funds are depleted. **Maximum incentive per home is \$800 a Year**

**CHECK OFF YOUR REBATE(S) • ATTACH REQUESTED DOCUMENTS**

**Replace Natural Gas – Water Heater** **Rebate Amount \$350**

Date of Installation: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Tank Capacity: \_\_\_\_\_ Tank Manufacturer: \_\_\_\_\_ Tank Serial# : \_\_\_\_\_

Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_

Disposal Method: Disposal/Donate/Recycled (Circle One) Age of old Appliance \_\_\_\_\_

Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

**Attach: 1.** Original receipt. **2.** Proof of installation. **3.** Copy of Permit.

**Replace Natural Gas – Tankless Water Heater** **Rebate Amount \$550**

Date of Installation: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_

Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)

Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

**Attach: 1.** Original receipt. **2.** Proof of installation. **3.** Copy of Permit.

**Replace Natural Gas – Gas Dryer** **Rebate Amount \$100**

Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_ Date Removed \_\_\_\_\_

Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)

Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

**Attach: 1.** Original receipt. **2.** Proof of installation.

**Replace Natural Gas - Range** **Rebate Amount \$100**

Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_

Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)

Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

**Attach: 1.** Original receipt. **2.** Proof of installation.

**Replace Natural Gas - Furnace** **Rebate Amount \$500**

Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_

Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)

Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

**Attach: 1.** Original receipt. **2.** Proof of installation. **3.** Copy of Permit.

**Please sign on back of application prior to submission of rebate application.**

**Replace = Replacing an existing Natural Gas appliance      Switch to = Switching from Electric, LP or new construction**

**CHECK OFF YOUR REBATE(S) • ATTACH REQUESTED DOCUMENTS**

**Switch to Natural Gas – Water Heater** **Rebate Amount \$500**  
Date of Installation: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_  
Tank Capacity: \_\_\_\_\_ Tank Manufacturer: \_\_\_\_\_ Tank Serial# : \_\_\_\_\_  
Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_  
Disposal Method: Disposal/Donate/Recycled (Circle One) Age of old Appliance \_\_\_\_\_  
Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

Attach: 1. Original receipt. 2. Proof of installation. 3. Copy of Permit.

**Switch to Natural Gas – Tankless Water Heater** **Rebate Amount \$675**  
Date of Installation: \_\_\_\_\_ Make: \_\_\_\_\_ Model: \_\_\_\_\_ Serial Number: \_\_\_\_\_  
Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)  
Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

Attach: 1. Original receipt. 2. Proof of installation. 3. Copy of Permit.

**Switch to Natural Gas – Gas Dryer** **Rebate Amount \$150**  
Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_ Date Removed \_\_\_\_\_  
Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)  
Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

Attach: 1. Original receipt. 2. Proof of installation.

**Switch to Natural Gas - Range** **Rebate Amount \$200**  
Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_  
Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)  
Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

Attach: 1. Original receipt. 2. Proof of installation.

**Switch to Natural Gas - Furnace** **Rebate Amount \$725**  
Date of Installation: \_\_\_\_\_ Manufacturer # \_\_\_\_\_ Model # \_\_\_\_\_  
Serial# of Old Unit: \_\_\_\_\_ Make/Model Old Unit: \_\_\_\_\_ Disposal Method: Disposal /Recycled (Circle One)  
Contractor Information: \_\_\_\_\_  
(Name Address Phone Number)

Attach: 1. 1. Original receipt. 2. Proof of installation. 3. Copy of Permit.

**Residential Reactivation Program**

The Residential Reactivation Program is designed to encourage the reactivation of existing service lines that are scheduled to be cut and capped. The program provides for a supplemental incentive over and above the Residential Appliance Replacement Program for service lines that have been inactive for 12 months.

**Service Reactivation** FPUA Service Reactivation Verified by \_\_\_\_\_ **Rebate Amount \$200**  
FPUA Representative Signature

Attach: 1. Copy of Permit (if applicable) 2. Verification of inactive service line on property.

**Customer Qualifications:** Form must be complete by the customer of record and submitted within 30 days of service/installation. Rebate is subject to approval, is contingent upon fund availability and may be discontinued without prior notification. Onsite verification may be required. In the event that a customer is in default of any payment obligation to FPUA or has payment arrangements, FPUA may apply the rebate as a credit against such amounts. I hereby certify that the rebate requirements have been met and the information provided is to best of my knowledge correct. By participating in this program, customer agrees that FPUA shall have the sole right to obtain and retain ownership of, and to qualify for and receive the full benefit of, any and all existing and future credits, certificates, benefits, environmental attributes, emissions reductions, offsets and/or allowances, however entitled, attributable to the purchase, installation and/or operation of the above rebates. Limit to one rebate per appliance. All appliances must be new. FPUA recommends that you dispose of your old appliance by calling Waste Pro at 772-595-9390 or the City of Fort Pierce at 772-467-3000. **Appliance must be installed to use FPUA natural gas.**

\_\_\_\_\_  
Customer Signature Date