

RESIDENTIAL EQUIPMENT ALTERNATE PAYEE AUTHORIZATION FORM



Complete the Alternate Payee Authorization Form to assign residential equipment rebates to an alternate payee. A completed Alternate Payee Authorization Form must be signed by the customer. Electronic signatures will not be accepted.

Name on account		
Installation address		
City	State	ZIP

Payee name		
Payee address		
City	State	ZIP

I authorize the payment of this rebate to the alternate payee listed above, and I understand that I will not be receiving the rebate payment. I also understand that my release of the payment to an alternate payee does not exempt me from the requirements outlined in the qualifications and conditions.	
Customer signature	Date