

For a limited time, Qualifying energy-efficient equipment purchases will receive an extra 50% rebate effective September 1, 2020 until December 31, 2020. Stated rebates includes extra 50%. Cash rebates may be available for the installation of qualified energy efficiency products in apartment dwelling units and in the common areas of apartment complexes, condominiums and mobile home parks.

HOW TO APPLY

1. Read the Terms and Conditions section for program details.
2. Visit our website at **socalgas.com** (search "MULTIFAMILY") to make sure funding is available and both reservations and applications are being accepted. Program may be subject to change or termination without prior notice at any time.
3. Before purchasing your energy-efficient product, be sure that the product meets the rebate requirements as listed in the product specification sheets. **Additionally, controllers for natural gas water heaters and boilers must be installed by an eligible, licensed Contractors State Licensing Board (CSLB) installer who has attended a SoCalGas® Boiler Controller Seminar.**
4. Eligible controllers for natural gas water heaters and boilers pre-installation requirements include:
 - A separate Multifamily Energy Efficiency Rebate Reservation Form for each site address with account number
 - A completed controller pre-installation form completed by an eligible installer
 - A SoCalGas pre-installation inspection on all controller products to verify status and eligibility
5. **Qualified products must be new, and purchased and installed between September 1, 2020 and December 31, 2020. Please be aware these purchase-and-install periods will end earlier if funds are no longer available.**
6. Once the product(s) are installed and pass required inspection, complete this Application Package (pages 4-8) and include the following items:
 - A completed, dated and signed Controller Application (original signature required).
 - Installer's completed Controller Post-Installation Forms (controllers for natural gas water heaters and boilers only).
 - A copy of a recent SoCalGas bill for the gas account serving the energy-efficient product.
- A copy of paid itemized sales receipt(s), contractor invoice(s) or paid home improvement contract(s).**

Cash on delivery (COD) and estimates are not acceptable proof of payment.

Receipts must indicate purchase date, manufacturer, model number, unit/apartment or location where the appliance was installed and must match the appliance Product Location Form. Be sure it indicates "Paid-in-full."

Email your completed application packet to:
multifamilyrebates@socalgas.com

Or mail to:
SoCalGas
2020 Multifamily Rebate Program
M.L. GT 20B3
P.O. Box 513249
Los Angeles, CA 90099-4722
7. Program will end on December 31, 2020, or earlier, if funds are no longer available. All applications must be postmarked within 45 calendar days after the 2020 program termination date to be considered for a rebate. The date a measure is removed or suspended from the 2020 program will represent the termination date for which postmark eligibility will be based. Call **1-800-508-2348** to check availability of funds.
8. SoCalGas may conduct an inspection to verify the energy efficiency product(s) eligibility and installation prior to rebate payment. All central domestic water heater (CDWH) controllers are inspected before and after installation.
9. A rebate check for qualified product(s) is generally mailed 90 days after SoCalGas approves a correct and completed application including all required documentation unless application is selected for inspection, which may add additional time. Questions? Call **1-800-508-2348** or email **multifamilyrebates@socalgas.com**.
10. You may not receive energy efficiency rebates for the same product or for the replacement of a product from more than one California Investor-Owned Utility (IOU) participating in this program or other third-party programs offering rebates, financing and other incentives, funded by the California Public Utilities Commission (CPUC).

STEPS TO RESERVE REBATE FUNDS FOR CDWH CONTROLLERS AND RESOURCES

Steps to Reserve Rebate Funds for CDWH Controllers

STEP 1: REVIEW ELIGIBILITY REQUIREMENTS

Carefully review this application package for product and program participation eligibility requirements, including the terms and conditions. This application or a checklist can be also requested online at socialgas.com (search "MULTIFAMILY") or call **1-800-508-2348**.

STEP 2: COMPLETE FORMS AND INCLUDE DOCUMENTS

Email the documents listed below to multifamilyrebates@socialgas.com.

- Complete, date and sign the **Controller Rebate Reservation Form** on page 4 (one reservation per account).
- Installer's completed **Pre-installation Checklist**.
- **Apartment and Common Area Products Form**.
- **Products Rebate Forms**.
- Copy of the SoCalGas bill where the controller products will be installed. Customer name on the reservation and application forms must match the name on the SoCalGas bill submitted.

Resource Information

CONTRACTORS STATE LICENSE BOARD (CSLB)

State law requires that a licensed contractor providing home improvement services greater than \$500 provide the customer with a Home Improvement Contract (HIC). You may wish to confirm you contractor's license status at the Contractors State License Board (CSLB) by calling the CSLB at **1-800-321-CSLB** (2752) or accessing their website:

- Visit cslb.ca.gov.
- Click on license status-check icon.
- Type in six-digit license number for verification.
- Confirm active status of license under license status.

Confirm that contractor holds the appropriate license under applicable classification heading.

APPLICATION CHECKLIST

BEFORE MAILING YOUR COMPLETED APPLICATION PACKAGE

Follow the checklist below to ensure proper handling of your rebate request.

- Application Form** – complete required information, sign, date and send original.
- Terms and Conditions** – review, sign, date and send original.
- Apartment and Common Area Products Form** – complete pertinent information.
- Product Location Form** – complete pertinent information.

If installing a controller for natural gas water heater or boiler:

- Include copy of **Reservation Request**
- Include valid **CSLB license number** from contractor or installer
- Post Installation Checklist** completed by eligible installer
- Include a copy of a recent **SoCalGas bill**. Name (customer of record), address and account number shown on bill must match name, site address and account number listed on the application form.
- Include a **receipt, invoice** or **other proof of purchase** document that lists purchase date(s), manufacturer, make and model number of product. **BE SURE VENDOR INDICATES "PAID IN FULL."**

EMAIL OR MAIL YOUR COMPLETED APPLICATION PACKET

Email: multifamilyrebates@socalgas.com

Mail: SoCalGas
2020 Multifamily Rebate Program
M.L. GT 20B3
P.O. Box 513249
Los Angeles, CA 90099-4722

PLEASE REMEMBER

- Sign and date** the Rebate Application and Terms and Conditions pages. (Mail original signatures only, no copies accepted).
- Make copies** of all submitted documents for your records.
- Controller rebates require Post-Installation forms to be **filled out by eligible installer**.

Allow **90 days** for application to be processed.

Incomplete and incorrect applications cannot be processed.

Resubmitted applications are processed on a first-come, first-serve basis, upon the new receipt date.

Call **1-800-508-2348** or email multifamilyrebates@socalgas.com with any questions.

CONTROLLER REBATE RESERVATION FORM

Please refer to the steps on page 2 on how to submit this form.

CUSTOMER INFORMATION

Name (as it appears on your bill)

□□□□ - □□□□ - □□□□□□ - □□
SoCalGas Account Number

PROPERTY OWNER OR MANAGER INFORMATION

Name

Check One: Property Owner Property Manager
(as authorized agent for Property Owner)

Daytime Phone Number

Email

PROPERTY INFORMATION

Site or Complex Name

Year Property Built

Apartments Units in Complex

Units Served by Water Heater or Boiler

Site Contact Person

Title

Site Contact Daytime Phone Number

Site or Product Location Address (if multiple, please attached a separate sheet)

City

ZIP

Service Address (address on the SoCalGas bill if different from site address)

City

ZIP

Rate Schedule (GR, GM)

Rebate Product

Product Quantity

CONTRACTOR INFORMATION

Non-corporation Exempt (e.g., tax exempt, non-profit)

Contractor Name

CSLB Number

Daytime Phone Number

Email

Name of Person Requesting Reservation

Installer Name (must have attended IOU Boiler Controller Seminar)

Requester Daytime Phone Number

Requester Email

How did you hear about the Multifamily Rebate Program: Mailer Insert Friend or Family
 Other _____ Contractor Name _____

I understand and acknowledge that I am hereby requesting a rebate reservation from SoCalGas for the products listed above, which are to be installed at the site address. This reservation will be in effect for 45 days commencing from the date I received written notice from SoCalGas confirming the reservation quantities, which may be different than the quantity I requested above. Rebate reservations are subject to program terms and conditions, set forth in the Multifamily Energy Efficiency Rebate Application Package, and do not guarantee future payment under the program. SoCalGas reserves the right to modify or reject any reservation request that, in SoCalGas' sole judgment, contravenes the policies, procedures or purposes of the Multifamily Energy Efficiency Rebate Program.

Print Name

Signature

Date (mm/dd/yy)

PAYEE INFORMATION

Tax Status: Corporation Non-corporation Exempt (e.g., tax exempt, non-profit)

Payee Name (make rebate check payable to)

Federal Tax ID Number or SSN

Mailing Address

City

ZIP

PAYMENT RELEASE AUTHORIZATION

Property owner or property manager, as authorized agent for property owner: Your authorization is required if the rebate check is to be made payable to another individual or entity. Please sign below.

SoCalGas will report this payment made to the third party on IRS Form 1099 as "Other Income" to you (the customer receiving the benefit of the rebate payment) unless the payment is less than \$600, or you have identified yourself as a corporation or exempt. You are urged to consult your tax advisor concerning the taxation of rebates. SoCalGas is not responsible for any taxes that may be imposed on you as a result of this rebate.

Print Name

Signature

Date (mm/dd/yy)

PRE-INSTALLATION CHECKLIST

PROPERTY INFORMATION

Please provide map of property indicating the location of the boiler(s), hot water heater(s) and storage tank(s).

Controller Name _____

Meter Number _____

Apartments Units in Complex _____

Units Served by Water Heater or Boiler _____

CDWH OR GAS END USE INFORMATION

Check yes or no for CDWH, if appliance or item is on the system on which the control will be installed.

Hot Water Use	CDWH	Hot Water Use	CDWH
Washer	<input type="checkbox"/> Yes <input type="checkbox"/> No	Hydronic Heat	<input type="checkbox"/> Yes <input type="checkbox"/> No
Swimming Pool	<input type="checkbox"/> Yes <input type="checkbox"/> No	Other	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pipe Insulation	<input type="checkbox"/> Yes <input type="checkbox"/> No	Isolation Valves	<input type="checkbox"/> Yes <input type="checkbox"/> No
Existing Control	<input type="checkbox"/> Yes <input type="checkbox"/> No	Bleeder Valve	<input type="checkbox"/> Yes <input type="checkbox"/> No
Condition (e.g., leaks, overly hot)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Backflow Valve at CWS	<input type="checkbox"/> Yes <input type="checkbox"/> No
Spa(s)	<input type="checkbox"/> Yes <input type="checkbox"/> No	Anti-scald Mixing Valve	<input type="checkbox"/> Yes <input type="checkbox"/> No
Return (HWR) Pipe Size:		Supply (HWS) Pipe Size:	
Pump Size:		Gas Meter Configuration:	
Gas Meter Configuration:		Gas Meter Location:	

BOILER OR WATER HEATER INFORMATION

General Description of CDWH System _____

CDWH Location _____

Boiler Manufacturer _____

Boiler Model Number _____

Boiler Serial Number _____

Pressure Regulator _____

Living Units Served _____

Btu In _____

Btu Out _____

Boiler HP _____

Number of Burners _____

Age of Burners _____

Water Storage: Internal External Other

Water Information:

Temp of H₂O Out _____

Setting or Reading _____

Temp of H₂O In _____

Setting or Reading _____

Primary Loop _____

Location and Operation of Primary Loop _____

APARTMENT AND COMMON AREA PRODUCTS FORM

Read the product specifications below before purchasing.

	Product	For Common Area (A)	Quantity Installed (B)	Total Rebate (A x B)
1	<p>CONTROLLERS AND DUAL SET POINT CONTROLLER(S) FOR NATURAL GAS WATER HEATERS AND BOILERS</p> <p>Reservations required.</p>			
2	<p>SERVING 35 UNITS OR LESS</p> <p>Rebate applies to new installations on existing natural gas-fired domestic hot water common systems serving multifamily dwelling units.</p> <p>Controllers must serve a multifamily building up to 35 units, provide the ability to lower temperatures during low-use periods and have a by-pass switch for allowing service to boiler. Must have natural gas distributed to the installation address by SoCalGas. CDWH system must be in proper working condition to qualify. (Reservation, pre- and post-inspection required.)</p> <p><i>Manufacturer name, make and model number must be included with a copy of your receipt.</i></p>	\$1,100		
3	<p>SERVING 36 UNITS OR MORE</p> <p>Rebate applies to new installations on existing natural gas-fired domestic hot water common systems serving multifamily dwelling units.</p> <p>Controllers must serve a multifamily building of 36 units or greater, provide the ability to lower temperatures during low-use periods and have a by-pass capability to allow service to boiler. Must have natural gas distributed to the installation address by SoCalGas. CDWH system must be in proper working condition to qualify. (Reservation, pre- and post-inspection required.)</p> <p><i>Manufacturer name, make and model number must be included with a copy of your receipt.</i></p>	\$2,100		
TOTAL REBATE AMOUNT				\$

TERMS AND CONDITIONS (original signatures required)

1. I understand that (a) applications are accepted on a first-come, first-served basis while funding is available, or until discontinued by the California Public Utilities Commission (CPUC), and must be postmarked within 45 days after the 2020 program termination date to be considered eligible for a rebate, and (b) qualified products must be purchased and installed between January 1, 2020 and December 31, 2020. I understand that these purchase and install periods will end earlier if funds are no longer available, and this program shall at all times be subject to change or termination without prior notice. ALL applications are processed on a first-come, first-served basis, upon receipt, until funds are no longer available. INCOMPLETE and INCORRECT APPLICATIONS CANNOT BE PROCESSED. Resubmitted applications are processed on a first-come, first-served basis, upon the new receipt date.
2. I am a property owner or property manager, as authorized agent for Property Owner, of a residential multifamily dwelling occupied by customers with a valid meter(s) served by SoCalGas. I understand that I am only eligible to receive rebates for products that correspond directly to the type service (i.e., natural gas distribution) for which my residential multifamily dwelling currently receives service from SoCalGas. Multifamily dwellings are defined as residential apartments, homeowners associations and/or mobile home parks with two or more units. The dwelling units must be fully constructed and occupied. New construction does not qualify.
3. I certify that the qualified energy efficiency products were purchased and installed between January 1, 2020 and December 31, 2020. These products are for use in my residential multifamily dwelling or common area.
4. I have submitted the required documents establishing proof-of-purchase for the products applied for in this Application which are paid itemized sales receipt(s), paid contractor invoice or paid Home Improvement Contract (HIC), with manufacturer name(s), model number(s), square footage and any other required documentation.
5. I certify that all energy efficiency products were purchased new, and I understand that resale products and products leased, rebuilt, rented and received from insurance claims or won as a prize, or new parts installed in existing products do not qualify.
6. I understand rebates will only be paid for products that meet the program specifications described on the Rebate Products Forms and related Specifications sheets.
7. Rebates are generally considered subsidies for tax purposes and could be taxable. You are urged to consult your tax advisor concerning the tax ability of these rebates. Rebates greater than \$600 will be reported to the IRS on Form 1099 unless you have checked corporation or exempt tax status on page 4 of this application form. SoCalGas is not responsible for any taxes that may be imposed on your business as a result of your receipt of this rebate.
8. I understand that the rebate amount cannot exceed my purchase price of the energy efficiency product, nor include tax or installation related costs, except for central system natural gas boilers, where the rebate amount cannot exceed the combination of purchase price and installation cost.
9. In the event that I choose to participate in the On-Bill Financing Program offered by SoCalGas to obtain financing for the products listed in this rebate form, I understand that the terms and conditions of participation in the On-Bill Financing Program will control (including, without limitation, the calculation of the rebate amount for the products listed in this rebate form) any conflict between the terms and conditions applicable to participation in this program and the On-Bill Financing Program.
10. I understand the qualified products may be self-installed, installed by a contractor, manufacturer or an appliance dealer.
11. I understand and agree that the choice of the energy efficiency products, selection of contractor, manufacturer, or dealer, purchase of materials, work performed and the payment thereof are my sole responsibility. I understand that SoCalGas makes no representations regarding products, contractors, manufacturers, dealers, materials or workmanship. I also understand that SoCalGas makes no warranty, whether expressed or implied, including warranty of merchantability or fitness for any particular purpose, use or application of the products or measures. I waive any and all claims against SoCalGas, its parent companies, its directors, officers, employees and authorized agents, and will indemnify SoCalGas for any claims arising out of or relating to the installation and/or use of the energy efficiency product(s) referred to in this Application. Without limiting the generality of the foregoing, none of such parties shall be liable hereunder for any type of damages, whether direct, indirect, incidental, consequential, exemplary reliance, punitive or special damages, including damages for loss of use, regardless of the form of action, whether in contract, indemnity, warranty, strict liability or tort, including negligence of any kind. I agree that SoCalGas has no liability whatsoever concerning the quality, safety or installation of the energy efficiency products, including their fitness, workmanship or any other matter.
12. I am responsible for meeting all program requirements and complying with my state/county/city governments, property owner and/or homeowners' association requirements (if any) in my area regarding local conditions, restrictions, codes, ordinances, rules and regulations pertaining to all installations. I further understand that it is my sole responsibility to ensure all rebated products are installed as per all manufacturers' specifications.
13. I agree to allow SoCalGas' representative and/or CPUC representative reasonable access to verify the installed products. I agree to this inspection to be eligible to participate in the program and receive a rebate for the qualified product. I understand this inspection is for the purpose of determining that the installed products meet all program(s) requirements.
14. I understand SoCalGas is not responsible for items lost or destroyed in transit.
15. I understand that I cannot receive a rebate for the same product or equipment from more than one California investor-owned utility or third-party energy efficiency program offering rebates, financing or other incentives funded with CPUC Public Purpose Surcharge funds.

PROPERTY OWNER OR MANAGER SIGNATURE

I CERTIFY THAT THE INFORMATION I HAVE PROVIDED IS TRUE AND CORRECT AND THE PRODUCTS FOR WHICH I AM REQUESTING A REBATE MEET THE REQUIREMENTS LISTED ON THE REBATE PRODUCTS FORM AND SPECIFICATION SHEET.

Check One: Property Owner Property Manager (as authorized agent for Property Owner)

As applicable: By checking this box, I confirm that I have used a licensed contractor, as appropriate, and followed applicable permitting requirements for this installation.

Print Name _____

Signature _____

Date (mm/dd/yy) _____

Funding is limited. Please call to make sure rebate applications are still being accepted. Applications are accepted on a first-come, first-served basis. Products must be purchased and installed between January 1, 2020 and December 31, 2020, however, please be aware these purchase and install periods will end earlier if funds are no longer available. This program shall at all times be subject to change or termination without prior notice. This program is funded by California utility customers and administered by Southern California Gas Company under the auspices of the California Public Utilities Commission.

APARTMENT, COMMON AREA AND MECHANICAL PRODUCT LOCATION FORM

Please provide all the information requested on this form. It is important for processing and inspection. A SoCalGas representative may conduct an on-site verification of the product(s) purchased and installed. Photocopies of this form are acceptable.

Site or Product Location Address	City	ZIP
Site Contact Person	Title	
Name of Apartment Complex	Number of Apartments	Apartments Receiving Products

Products Installed By: Self Contractor Property Manager (as authorized agent for Property Owner)

Required Information	Example	Location 1	Location 2	Location 3	Location 4	Location 5
Product Location Address	1234 Maple St.					
Product Location	Apt. 101					
Type of Product Installed	Water heater					
Product Make	GE					
Product Model Number	HDA2000					
Units	1					
Individual Unit K	√					
Common Area (L, B, P, O)*	L					
Other	-					
Insulation (Sq. Ft.)	200					
Date Purchased	1/1/18					
Date Installed	1/2/18					

*Common area: L = Laundry Room, B = Boiler Room, P = Pool, O = Other (describe here—e.g., spa, utility room): _____

POST-INSTALLATION CHECKLIST PAGE 1 OF 2

PRODUCT LOCATION

CONTRACTOR INFORMATION

Non-corporation Exempt (e.g., tax exempt, non-profit)

Contractor Name _____

Installer Name (must have attended IOU Boiler Controller Seminar) _____

Contractor Signature _____

Date (mm/dd/yy) _____

POST-INSTALLATION REQUIREMENTS

Checklist Items	
<input type="checkbox"/>	Installed controls per manufacturer's specs
<input type="checkbox"/>	Verified that controls are operating as specified
<input type="checkbox"/>	Left no safety hazards
<input type="checkbox"/>	Removed all installation debris
<input type="checkbox"/>	Provided operator's manual for control to site personnel
<input type="checkbox"/>	Provided maintenance and safety recommendations to site personnel
<input type="checkbox"/>	Instructed site personnel on system fault conditions to watch for
<input type="checkbox"/>	Left contact information on control box
<input type="checkbox"/>	Other (describe)

CDWH SYSTEM INFORMATION

Action Taken	
Added supply (HWS) pipe insulation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Added return (HWR) pipe insulation	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pipe water leak repairs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pump water leak repairs	<input type="checkbox"/> Yes <input type="checkbox"/> No
Pump manufacturer	<input type="checkbox"/> Yes <input type="checkbox"/> No
Wattage	<input type="checkbox"/> Yes <input type="checkbox"/> No
Added backflow prevention valve	<input type="checkbox"/> Yes <input type="checkbox"/> No
Added isolation valve	<input type="checkbox"/> Yes <input type="checkbox"/> No
Added bleeder valve	<input type="checkbox"/> Yes <input type="checkbox"/> No

POST-INSTALLATION CHECKLIST PAGE 2 OF 2

BOILER OR WATER HEATER INFORMATION

General Description of CDWH System		CDWH Location		
Boiler Manufacturer	Boiler Model Number	Boiler Serial Number	Pressure Regulator	Living Units Served
Btu In	Btu Out	Boiler HP	Number of Burners	Age of Burners
Water Storage: <input type="checkbox"/> Internal <input type="checkbox"/> External <input type="checkbox"/> Other				
Water Information:				
	Temp of H ₂ O Out	Setting or Reading	Temp of H ₂ O In	Setting or Reading
	Primary Loop	Location and Operation of Primary Loop		

