



Applicant Information

TID Customer/Tenant Name (as it appears on TID bill)		TID Account Number
Owners Name (if different than TID Customer/Tenant)		Owner Phone Number
Installation Address	City / Zip	Phone Number
Mailing Address (if different than Installation Address)		

Installing HVAC Contractor Information (if applicable)

Company Name		CA State Contractor License Number
Mailing Address		Phone Number
I certify that the products described on this application are installed at the installation address listed above and attest that all information given is accurate.		
Installing Contractor Signature		Date

Central Air Conditioner Data

New Equipment Information		Old Equipment Information	
Attach Certificate of ARI-Certified Performance for the installed unit (s): https://www.ahrinet.org		Please provide the following information about the equipment being replaced.	
SEER	ARI Reference Number	Manufacturer Name	
EER	Condenser Manufacturer Name	Model Number	
Cooling Capacity (tons)	Condenser Model Number	Year Manufactured	
Type (circle)	Indoor Coil Manufacturer Name	SEER	EER
Standard	Indoor Coil Model Number	Cooling Capacity (tons)	
Heat Pump		Is the unit being replaced operational?	
Configuration (circle)			
Split			
Packaged			
Building Permit Number & Jurisdiction (City or County issuing Permit)			

Customer Acceptance of Terms

I certify that the equipment listed on this application has been purchased and installed at the address listed above. I agree to verification of the information provided to TID. I have read and understand the program requirements and attest that all information given is accurate.

Applicant Signature _____ Date _____

Mail completed applications along with a copy of the following documentation: "Finalized" building permit, ARI certificate showing the SEER and EER values, invoice for equipment and installation along with cooling load calculation (if applicable) to:

TID
Attn: Consumer Programs
P.O. Box 949
Turlock, CA 95381

TID Internal Use:	Questions? Call TID at 209-883-8432
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