

Energy Efficiency Program

contractor receipt/invoice that includes:



Contractor Circle instant discount commercial invoice checklist

Only Contractor Circle members can offer rebates as an instant discount. Submit the rebate application and a

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	Contractor name, address and phone number
	Account holder or business name and installation address (as it appears on the Nicor Gas bill)
	Date installed and operational (clearly labeled)
	Type of equipment, manufacturer and model
	Total installed cost (itemized by each piece of rebate-qualifying equipment or service)
	Proof of payment or payment terms (balance due of zero, paid-in-full stamp or financing terms)
	The full and correct rebate amount deducted from the purchase price, clearly labeled as a
	Nicor Gas Energy Efficiency Program rebate Other discounts or rebates unrelated to Nicor Gas must be shown as a separate line item.
	Customer's signature and date of installation If you are not able to get the customer signature on the final receipt/invoice, have the customer complete the section below and sign. Submit this completed checklist with the rebate application and the final receipt/invoice.
Customer release of rebate to contractor	
By providing my information and signature below, I confirm my contractor has provided me with the Nicor Gas Energy Efficiency Program rebate as an instant discount deducted from the purchase price. I authorize Nicor Gas to provide	

the contractor with the rebate for the product(s) installed/

Total instant discount amount: \$ ___



Date signed:

service(s) provided.

Installation date:

Nicor Gas account number: L Account holder name (print): L Account holder signature:

For additional information, visit **nicorgas.com/bizrebates** or call **877.886.4239**

Contractors must be Contractor Circle installing members to offer rebates as instant discounts. For complete program rules, dates and eligibility, visit nicorgas.com/installer

The Nicor Gas Energy Efficiency Program is funded by Nicor Gas customers in compliance with state law.