

Otter Tail Power Company Commercial Lighting Retrofit & New Construction Rebate Form

Please submit this completed form, including a customer signature, and a copy of the invoice stating detailed equipment information and costs to your local Otter Tail Power Company representative, email to Rebates@otpco.com, or mail to the address at the right.

Otter Tail Power Company
Rebates
PO Box 496
Fergus Falls, MN 56538-0496

CUSTOMER INFORMATION

Office Use: Pre-Request # _____

Name: _____ Contact Name: _____ Phone: _____ OTP Account #: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Address of Installation (if different): _____

INSTALLATION INFORMATION

Installing Contractor: _____ Installation Date: _____

Contact Name: _____ Phone: _____ Does the building have A/C? Yes No

INSTALLED (complete this section for retrofit & new construction)					REMOVED (complete this section for retrofit only)		
Location	Type	Description (ex: 40w LED fixtures; 5w LED exit lights; motion sensors)	Qty	Watts/ Fixture	Description (ex: 4' T8 4 lamp; 400w MH; 75w incandescent)	Qty	Watts/ Fixture
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					
<input type="checkbox"/> Indoor <input type="checkbox"/> Outdoor	<input type="checkbox"/> Fixture <input type="checkbox"/> Lamp only	<input type="checkbox"/> Lamp with ballast bypass					

CUSTOMER ACKNOWLEDGEMENT

I certify that I have purchased the equipment described on this form and that it is installed at the installation address indicated. I agree to the Otter Tail Power Company rebate terms and conditions listed on Otter Tail Power Company's website at www.otpco.com/WaysToSave or provided by the installing contractor.

Customer Signature: _____ Date: _____