Marketer Registration Form (MRF)

PROGRAM REQUIREMENTS

| *nlease print*

- Rebate offer applies to all SAFETY CHECKS on replacement of units with propane that are installed MARCH 1, 2024 to
 DECEMBER 31, 2024 or until campaign funds are depleted. Propane-to-propane conversions and new construction
 installations are eligible. Rebate applications must be received at NYPGA during the active rebate period designated by
 December 31 for consideration.
- 2. This **Marketer Registration Form** (MRF) must be submitted by your company (for each location) once during 2024, prior to any rebate applications, to participate in the rebate program. You may also complete the MRF form online.
- 3. The **BUYER'S Rebate Application** form must be completed by both you and your customer before or upon the installation of the equipment.
- 4. The program is on a first come, first served basis. Once all rebate funding has been reserved/awarded the program will end.
- 5. The program will be administered by the NY PERC office with rebate checks going directly from the NY PERC to the consumer.
- 6. The NY PERC Marketing Committee reserves the right to periodically evaluate and adjust all aspects of the Program, as it deems necessary.
- 7. It is the Propane Marketer Accredited Representative's responsibility to become fully versed with the requirements of the NY PERC's Safe Appliance Installation/Rebate program.
- 8. The Propane Marketer Accredited "MRF" Representative will be the only person from the company to handle rebate communications with NY PERC which includes emailing and calling about rebates. NY PERC will only accept rebate paperwork from the Propane Marketer's Accredited Representative. A propane marketer with more than one location may have one Accredited Representative from each location.

certify that Lunderstand the above-stated

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rules, will train my employed Accredited Representative for it is my responsibility to facil PERC.	or my compan	y location and w	vill address any reb	oate discrepancies.	I further understand that
The safety inspection accompartest; 2) a pressure test if require					
Print Name					
Company Name					
Company Address					
City	State	Zip			
Email (required)			Phone		
Signaturo		Titlo			

If not completing online, submit completed form via mail or email attachment to: