



Natural Gas Equipment

Commercial Kitchen Rebate Application

Rebate Program Terms & Conditions

1. You must be a **commercial** customer of Vermont Gas with a G1, G2, G3 or G4 natural gas rate and installing high efficiency gas equipment in an existing building. If your project is new construction or you are a new Vermont Gas customer, please contact Vermont Gas (802) 951-0321 for assistance
2. Your total rebate must be equal to \$5,000 or less. If your rebate amount exceeds \$5,000 you must contact Vermont Gas prior to doing the work and prior approval and incentive agreement will be required.
3. Equipment must be purchased and installed between January 1, 2024 and December 31, 2024 in order to qualify. Rebate forms must be received at Vermont Gas or postmarked by January 31, 2025.
4. Questions? Please contact (802) 951-0321

Agreement

VGS agrees to pay the Incentive Amount only after VGS has confirmed, in its sole and absolute discretion, that the high efficiency equipment was installed and is complete.

VGS disclaims all warranties, whether express or implied, including, but not limited to, any implied warranty of merchantability or of fitness for a particular purpose, that the acquisition or installation for the project will result in or produce any specific level of energy savings or measurable energy-related benefit, or that the equipment applied to the project, and the installation thereof, complies with any specifications, laws, ordinances, regulations, codes or industry standards. The installation of the project pursuant to this agreement will be subject only to any warranties that may arise in connection with work performed or supplied by the installation contractor or contractors and/or equipment suppliers or manufacturers.

If Customer is not the owner of the Property, Customer has received authorization from the owner of the Property.

I have read and understand the program requirements and terms and conditions set forth in this rebate form and I agree to abide by those requirements. Furthermore, I concur that I must meet all eligibility criteria in order to be paid under this program.

_____	_____	_____
Customer Signature	Customer Name (please print)	Date
_____	\$	_____
Installation Date (month/day/year)	Rebate Amount	

***Rebate amounts effective until December 31, 2024**

Please note that this rebate form and paid itemized invoices or contractor proposals must be received at Vermont Gas or postmarked no later than January 31, 2025. Equipment manufacturer and model number is required on all invoices and/or proposals.

Customer Information

Company Name		Name of Contact Person		Title
Contact Phone Number	Fax Number	Email		
Address Where Equipment is Installed		Town/City	Square Footage	
Company Name *check payable to		Telephone Number	Fax Number	Vermont Gas Account #
Mailing Address for Rebate		Town/City	State	Zip code

*If you are requesting the check is to be made payable to a third party, a completed Payment Release Form is also required.

Vermont Gas Provides the Following Commercial Kitchen Equipment Rebates

Eligible Equipment (must be purchased new)	Required Efficiency	Per Unit Rebate	Total Quantity	Total
Pre-Rinse Valves	≤ 1.6 gpm	FREE		
Fryers	All EStar units are eligible	\$750		
Steam Cooker	All EStar units are eligible	\$1750		
Convection Oven	All EStar units are eligible (full size)	\$750		
Combination Oven ≤ 24 Gas Bins	All EStar units are eligible	\$500		
Combination Oven >24 and ≤ 40	All EStar units are eligible	\$1000		
Griddle	All EStar units are eligible	\$400		
Under Counter Dishwasher	All EStar units are eligible	\$500		
Stationary Single Tank Door Dishwasher	All EStar units are eligible	\$1000		
Single Tank Conveyor Dishwasher	All EStar units are eligible	\$1000		
Multi Tank Conveyor Dishwasher	All EStar units are eligible	\$2000		
Pot/Pan/Utensil Dishwasher	All EStar units are eligible	\$750		
Total Equipment Rebates (above)				\$
TOTAL REBATE AMOUNT				\$

Forward this application along with the contractors final invoice to:

Vermont Gas Systems
 Attn: Efficiency Team
 85 Swift Street
 South Burlington, VT 05403

Via email as an attachment at: Efficiency@vermontgas.com



Commercial Rebate Application Payment Release Form

(required only if requesting payment to a third party)

As a customer of Vermont Gas with account number _____ and service address of _____ (street) in _____ (city), I request that my 2024 Energy Saving Equipment Replacement Program rebate check be made payable and sent to the third party below:

Name Company

Mailing Address

City

Payee Federal Tax Identification Number: _____ - _____			
Payee Tax Status (check one):			
<input type="checkbox"/> Corporation	<input type="checkbox"/> Partnership	<input type="checkbox"/> Individual/Sole Proprietor	<input type="checkbox"/> Other _____

By signing this form, I acknowledge that I understand I will not receive a rebate check from Vermont Gas Systems, Inc.

I understand that releasing payment to this third party does not exempt me from the program requirements outlined in the agreement on my 2024 VGS Energy Savings Equipment Replacement Program rebate

Signature

Customer Name (printed) Title