



REBATE APPLICATION INSTRUCTIONS

- 1. Please confirm you are a UGI Gas Pennsylvania resident to be eligible for these programs.
2. Purchase and install the qualifying equipment. Must be purchased and installed prior to September 30, 2025. Applications must be postmarked within 90 days from installation date.
3. Return the completed application along with the following items:
- Completed and signed application (on back)
- Copy of a dated, paid in full invoice / receipt showing:
- Equipment Manufacturer
- Model Number
- Date of Purchase
- Contractor Information
- Equipment & Installation Cost
- A copy of W9 form (if requested rebate amount exceeds \$600)
4. IMPORTANT: Photocopy your entire submission for your records.
5. Mail the signed rebate form with attached receipt to: UGI Utilities Rebates • P.O. Box 2528 Manchester, CT 06045

PROGRAM DETAILS

This rebate program applies to equipment purchased and installed prior to September 30, 2025. Applications must be postmarked within 90 days from installation date. Please allow 6-8 weeks processing time. If you have questions please call 844-317-6122. If you'd like to apply online go to www.ugi.com/commgasrebates.

QUALIFYING EQUIPMENT

Table with 3 columns: Equipment, Minimum Efficiency, Rebate Amount. Lists various kitchen equipment like fryers, griddles, and dishwashers with their respective rebates.

TERMS & CONDITIONS

Applicant must be a UGI Utilities, Inc. - Pennsylvania customer and a Rate Class N, NT, DS or LFD to be eligible; Rebate application must be accompanied by proof of purchase (legible copy of dated sales receipt); Rebate application must include valid customer account number, manufacturer, model number and installation date; Qualifying products must be new and listed by the EPA as ENERGY STAR® qualified on www.energystar.gov; Additional information regarding eligibility and products may be found in the programs and rebates section at www.ugi.com/savesmart; Rebate valid for qualified appliances purchased and installed prior to September 30, 2025. Applications must be postmarked within 90 days from installation date. Rebates are subject to available program funding; Applications are subject to audit and verification by UGI. UGI reserves the right to verify the information provided in the application prior to or after issuing a rebate; Rebates will be issued in the form of checks, not utility bill credits. Payments will be mailed to the account holder and address on record; UGI is not responsible for items lost or delayed in the mail, or any rebate delayed due to incomplete or incorrect applications; UGI is not responsible for any taxes that may be imposed as a result of applicant's receipt of any rebate from UGI; UGI does not make or provide any warranty, express or implied, or endorsement of any manufacturer, appliance or product. UGI is not responsible for the accuracy, completeness, or usefulness of any information, estimated savings or benefits attributed to the products that qualify for this program. Reference to any specific product, project, or service by manufacturer, trade name, trademark, or otherwise does not constitute or imply UGI's endorsement or recommendation; UGI is not responsible if a retailer or contractor provides inaccurate information to the applicant about the amount, terms and/or conditions of the actual rebate; UGI will not pay rebates for any appliance that is mislabeled or misrepresented by dealers regarding rebate qualifications; UGI reserves the right at any time to extend, modify or terminate this program.





# COMMERCIAL KITCHEN EQUIPMENT PROGRAM

## ACCOUNT INFORMATION

*\*Indicates required fields*

Account Holder First Name:\* \_\_\_\_\_ Last Name:\* \_\_\_\_\_

Installation / Service Address:\* \_\_\_\_\_

City:\* \_\_\_\_\_ State:\* \_\_\_\_\_ ZIP Code:\* \_\_\_\_\_

UGI Gas Account Number:\* \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Check this box if you are a new gas customer and account number is not yet available.

## PAYEE INFORMATION

Check this box if the payee information is the same as the account information above.

Payee First Name:\* \_\_\_\_\_ Last Name:\* \_\_\_\_\_

Mailing Address (Where check will be mailed to):\* \_\_\_\_\_

City:\* \_\_\_\_\_ State:\* \_\_\_\_\_ ZIP Code:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

How did you hear about UGI Utilities' rebates?

UGI Bill Insert  Radio  Television  Internet  Store  Contractor  UGI Email  Social Media

## CONTRACTOR INFORMATION *Note: Manufacturer and Model number are required to be on the installation invoice.*

Contractor Name:\* \_\_\_\_\_ Contractor Address:\* \_\_\_\_\_

City:\* \_\_\_\_\_ State:\* \_\_\_\_\_ ZIP Code:\* \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

## COMMERCIAL KITCHEN EQUIPMENT INFORMATION *Note: Manufacturer and Model number are required to be on the installation invoice.*

Type of equipment	Manufacturer	Model #	Quantity	Rebate
Natural Gas Commercial Fryer (Small)				
Natural Gas Commercial Fryer (Large)				
Natural Gas Commercial Griddle				
Dishwasher (Low Temp - Undercounter)				
Dishwasher (High Temp - Stationary Single Tank Door)				
Dishwasher (High Temp - Undercounter)				
Dishwasher (Low Temp - Stationary Single Tank Door)				
Dishwasher (Low Temp - Single Tank Conveyor)				
Dishwasher (High Temp - Single Tank Conveyor)				

## ACCEPTANCE OF TERMS

I hereby request a rebate for the equipment listed. Attached are copies of all receipts or invoices. I have read and agree to the Terms and Conditions on the reverse of this form. I certify that a licensed contractor has installed the listed equipment (when applicable) in accordance with Program Guidelines and Terms and Conditions. I certify that I have seen the Energy Efficient Measures that have been installed and I am satisfied with their installation.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Email [savesmart@ugi.com](mailto:savesmart@ugi.com) or call 1-844-317-6122 if you have any questions.**