FURNACE, BOILER AND CENTRAL AIR CONDITIONER COMPREHENSIVE TUNE-UP PROGRAM 2018 CONTRACTOR PARTICIPATION AGREEMENT



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Company Name:		Contact Name:	Contact Name:				
Street Address:							
Street Address.							
City:			State:	ZIP:	ZIP:		
Phone:	Fax:		Email:	Email:			
HVACR Licensee Name:	HVACR License Number:		HV/ACR Licens	HVACR License Expiration Date:			
TIVAON LICEIISee Name.	TIVACH LICENSE	HVACA LICEISE Nulliber.		Licenses will be verified prior to eligibility.			
HVACR Endorsements:							
Must have limited heating service or unl Must have limited refrigeration and air c	•		ervice for AC tune-up	ı.			
For Find a Contractor website listing, ple			·				
L DECIDENTIAL TUNE UD DDOLEOT	TONG						
II. RESIDENTIAL TUNE-UP PROJECTIONS			Boilers	Furnaces	Air Conditione		
About how many residential furnace, boiler and central air conditioner tune-ups do you expect to perform within the Consumers Energy service territory for this calendar year?							
How many Consumers Energy qualifying furnace, boiler and central air conditioner tune-ups do you plan to perform in this calendar year?							
II. CONTRACTOR PARTICIPATION							
Contractors wishing to participate in Consumers Energy Residential Heat Contractor agrees to complete the Contractors will be listed on the Fir Tune-Up Services" and are required result in removal from the Tune-Up	ating, Cooling and Water Heat rebate submission using the and a Contractor webpage un d to perform eligible tune-ups	ting program and have a comp contractor online application o der "Heating Comprehensive"	oleted Contractor F or mobile application Tune-Up Services'	Participation Agre on on behalf of th " and "Cooling C	eement on file. ne homeowner. omprehensive		
All rebate submissions require a co copy of your invoice to the homeow	•			•	,		
V. CONTRACTOR AGREEMENT							
ON BEHALF OF THE CONTRACTOR	, I HAVE READ AND UNDERS	STAND THE TERMS OF THIS A	GREEMENT AND \	OLUNTARILY EN	ITER INTO IT.		
Contractor:		Authorized Representative:					
Title:	Date:	5	Signature:				

Please submit this completed application to consumershvac@icf.com or fax it to 517-768-6320.

