NATURAL GAS HOME BUILDERS REBATE

Natural Gas, America's Energy Choice

DATE: _____

DIRECT ORDER

INDICATE WHICH GAS APPLIANCES ARE INSTALLED

INV. NO. _____

REBATE AMOUNT $_____

REBATE	APPLIANCE(S)	
$1000	for a gas water heater with two other qualifying appliances (less than 3 appliances will follow NATURAL GAS HOME REBATE individual appliance amounts)	
	WATER HEATER *(required)*	_____
	FURNACE	_____
	STOVE/RANGE	_____
	CLOTHES DRYER	_____
$75	FIREPLACE	_____
$75	POOL HEATER	_____

Site Address _____ **City**_____ **State** __TX__ **Zip Code**_____

Builders Company[1] (Please Print) _____ **Phone** _____

Rebate[2] Mailing Address _____ **City**_____ **State** __TX__ **Zip Code**_____

[1, 2] The Builders Company and Rebate Mailing Address must match the Owner and Owner Address of the Permit Application.
*To qualify, appliances must be installed and operational in accordance with Home Builders Partnership Agreement.
*Inspection of premises by the City of Corpus Christi Gas Department Personnel is required.
*New gas line installation must have filed a plumbing permit with Corpus Christi Development Services.
*Rebate request must be submitted within 12 months of the date of the Certificate of Occupancy.
*Residential single family home builders only building withing the Corpus Christi City limits are eligible.
*This program cannot be used in conjunction with any other program.

I certify that the information provided is true and correct to the best of my knowledge.

_____

Builder's Signature **Print Name**

FOR OFFICE USE ONLY

Application: Approved_____ Disapproved_____ Inspection Date_____

Comments: _____

_____ ___ Safety Information Delivered

Gas Department Personnel

_____

Finance & Resource Management Superintendent

FUND 4130

ORG 34160

CATEGORY 023

ACCT 530206

Permit No._____

Marketing Rep._____

City of Corpus Christi Gas Department
4225 S. Port Ave.
Corpus Christi, TX 78415
Office: 361-885-6922

Revised: 12/3/2024