

Mansfield Municipal Electric Department

2024 Electric Vehicle Charger Rebate Form

Charger	Qualifier	Rebate
Full Electric Vehicle Charger	Residential customers must purchase a qualifying charger between January 01, 2024 and December 31, 2024 and enroll in Connected Homes program. Rebate (full purchase price, not including shipping or tax, up to \$700) will be paid once proof of installation within 30 days by a licensed electrician at service address in Mansfield, MA <u>and</u> enrollment in Connected Homes program has been verified. One EV charger rebate per household. Go to www.nextzero.org/mansfield/connected-homes/	Up to \$700

Please fill out completely, attach a copy of your sales receipt dated between January 01, 2024 and December 31, 2024 and proof of payment.

Application must be received no later than January 31, 2025. Mail to:

Mansfield Electric Rebate Program; 125 High St Unit # 1; Mansfield, MA 02048

Rebates \$500 or less will be applied directly to active customer account as a credit; over \$500 have option of rebate check. Please allow 6-8 weeks for processing.

Residential Electric Account Number _____ Name on Account _____

Utility Account/Installation Address _____

Phone # _____ Email Address _____

Mailing Address (if different from Installation Address) Street/PO Box _____

City/Town _____ State _____ Zip Code _____

Charger Brand _____ Charger Model # _____ Serial # _____

Is your home Wi-Fi enabled? ☐ Yes ☐ No Vehicle Make _____ Model _____ Year _____ Date Acquired _____

By signing this form, I certify that I purchased the product noted above for the installation address above and I am the customer of record for Mansfield Electric and agree to absolve Mansfield Municipal Electric Department, its board members, employees and agents from any liability associated with the charging equipment provided to me hereunder, including, but not limited to, any damage, defects, failures, fires, vehicle damage or other damages to person or property associated with the proper or improper installation or operation of any of the charging equipment provided to me hereunder.

For rebates over \$500, I would prefer a refund to be processed by the following: ☐ Check (allow 6-8 weeks) OR ☐ Account Credit

Customer Signature (Required) _____ Date _____

FOR OFFICE USE ONLY:

C/B/S ____/____/____ Code # _____ Refund \$ _____ Date _____