## NC PERF 2024 – 2025 Safe Installation of Appliances Rebate Form

This form must be completed by a participating propane marketer. A safety inspection must be performed after the installation of each new qualifying appliance(s) and the acknowledgement of that inspection must be documented on this form in a manner acceptable to the NC PERF. Minimum requirements of the safety inspection are located on page 2 of this form.

This form and receipts showing purchase of each appliance must be submitted to the NC PERF for the customer to be eligible for consideration of any rebate(s). Failure to furnish all necessary documentation will result in the customer being declared ineligible for consideration of any rebate(s). The required inspections must be performed to conform to industry standard practices, NC Fuel Gas Code requirements, or local code requirements. The NC PERF and the Southeast Propane Alliance assume no liability for a customer being declared ineligible for consideration of any rebate(s).

customer's Name <u>Odme</u>	<u>s che</u>	en_			
Mailing Address	old ha	m Rd			
City West Eno		St	ateNC	Zip 25	1376
Phone: 910-695.5	56	Email:	cheek home	coamail.co	m
Gas Company McNeill  Mailing Address PO Box 3	0114			J	
			<del></del>		
city Aberdeen		St	ate_ <i>NC</i>	Zip_ 2831.	5
Email:					
			mer location per		
Description	Amount per unit	Number of units	Model number(s)	Serial number(s)	Total
ropane furnace, or gas pack Replacement	\$400.00				
ropane-fueled vented room heater or wall furnace New Replacement	\$150.00				
ropane-fueled tankless water heater New Replacement	\$300.00		NE199e REU-VEZ737Wb-U	1) Th 114-0464	14
ropane-fueled storage-type water eater New Replacement	\$300.00		<u>, , , , , , , , , , , , , , , , , , , </u>	7 . 63.07	
oual fuel heat pump with propane as ne fuel (includes hydronic) New Replacement	\$400.00	-			
ropane-fueled cook top/range  New Replacement	\$50.00	-			
ropane-fueled clothes dryer  New Replacement	\$50.00				
			Maximum	Grand Total	

\$1500.00

# **Required Signatures and Dates**

Company O	- 4103
Company Owner/Manager/ or Technician's signatu	Iro.
1, Danua Alred	are:  that the required tests were performed in compliance with al
applicable laws and regulations governing the insta	that the required tests were performed in compliance with al
Date of Inspection: $8 - 6 - 2025$	indicion,
The check here if install is new home contractor	construction (No receipt required)
Check here if install is new home contractor  Name of Builder/Contractor  C	heek (Cheek. Homes)
1	- (- '101120)

(This paperwork must be submitted to SEPA within 30 days of appliance inspection date to receive rebate)

#### Disclaimer:

The propane marketer seeking a rebate must submit a full and complete Application form. Submission of the Application form constitutes a representation on the part of the participating propane marketer that the required safety test was completed. A safety inspection must be performed by the participating propane marketer after the installation of each new qualifying appliance(s) The safety inspection for qualifying appliance installations consists of the following: 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations; and 3) a the qualifying appliance and with the manufacturer's installation instructions. The Southeast Propane Alliance and NC PERF assumes no responsibility whatsoever for the installation, inspection, or testing of the qualifying appliance(s) or any associated gas system and, by issuing a Alliance and NC PERF disclaims any liability for any personal injury, property damage, business losses or other damages of any nature whatsoever, whether special, indirect, consequential, or compensatory, directly or indirectly arising from the installation of the qualifying appliance(s).

Please submit your 2-page rebate form and receipt(s) to:

Mail: NC PERF

5109 Hollyridge Dr.

Suite 101

Raleigh, NC 27612

Fax:

919-781-7481

Email: info@ncpropanerebates.com

As of 07/01/24

#### Invoice

supplyhouse
Hubbard
115 DAVIS ST SOUTHERN PINES NC 28387
910-692-2210 Fax 910-692-5000

INVOICE DATE	JAVC.	ICE NUMBER
07/16/25	S3989	438.002
REMIT TO:	PAGE NO.	
P O DRAWER 1570		
FAYETTEVILLE NC 203	02-1570	

BILL TO: J. Cheek Builders LLC 583 Carthage Street CAMERON, NC 28326

SHIP TO: J. Cheek Builders LLC 445 Oldham Road WEST END, NC 27376

CUSTOMER MUMBER CUSTO	MER ORDER RUMBER	<b> </b>	<b> . . . .</b>	ASE NUMBER				MLESPERSOR :	
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RINNAI PCD09-SHS WH P RE180iN, RE199eN, RE1	IPE COVER FOR 99iNS391828		1	כ	-	183.	909		183.91
RINNAI MIVK-T-LW ISOL KIT	ATION VALVE		1	I	-	118.	732		118.73
NC WHITE GOODS TAX			1	1		2.	700		2.70
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### Invoice

supplyhouse
Hubbard
115 DAVIS ST SOUTHERN PINES NC 28387
910-692-2210 Fax 910-692-5000

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BILL TO: J. Cheek Builders LLC 583 Carthage Street CAMERON, NC 28326 SHIP TO: J. Cheek Builders LLC 445 Oldham Road WEST END, NC 27376

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54439									BR2 HO	USE	ACCOUNT
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1.5% per month finance charge on past due invoices. Invoiced customer responsible for attorney fees for collection on this account. Receipt required for all returns. Returns to be made within 60 days, restocking						Sa	les Tax	₹	169.46		
and shipping fees apply. Re special orders, Damages or purchases must be returned	turns must be in ori shortages must be re	ginal cor	ntainer in se	allable condi	ion. No re	turns on	t∞lm or	Amo	unt Due	3	27.43
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