

SIGN IN TO TRACK REWARDS AND MANAGE ACCOUNT

LOWE'S HOME CENTERS, LLC
910 US 401 BY-PASS
LAURINBURG, NC 28352 (910) 610-2365

- SALE -

SALES#: S2564MBW 5263448 TRANS#: B6483194 04-13-26

962546 AO SMITH 40-GAL 6YR LP SH	819.00
NC WHITE GOODS FEE	3.00
758109 INSTALL KIT-GAS WH	32.77
63830 MURPHY 32-OZ OIL SOAP SOU	4.47
6036640 2.85-QT WHITE BIN FROST L	2.00

SUBTOTAL:	861.24
TOTAL TAX:	57.93
INVOICE 94498 TOTAL:	919.17
VISA:	919.17

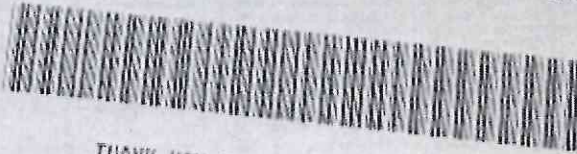
***** MY LOWE'S PRO REWARDS *****

EST. POINTS EARNED: 858*

* Points are awarded on eligible purchases for orders that have been settled and fulfilled

VISA: XXXXXXXXXXXX9644 AMOUNT: 919.17 AUTHCD: 816714
 CHIP REFID: 256434498953 04/13/26 15:30:48
 CUSTOMER CODE: n/a
 TUR : 8080088000
 TSI : 6800

STORE: 2564 TERMINAL: 34 04/13/26 15:31:03
 # OF ITEMS PURCHASED: 4
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
 FOR FULL DETAILS ON OUR RETURN POLICY, VISIT
 LOWES.COM/RETURNS
 A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
 AT OUR CUSTOMER SERVICE DESK

MY LOWE'S REWARDS CREDIT CARDHOLDERS GET MORE.
 FOR DETAILS VISIT LOWES.COM/MYLOWESREWARDS

 SHARE YOUR FEEDBACK!
 ENTER FOR A CHANCE TO BE
 ONE OF FIVE \$500 WINNERS

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 Wanda Harris
 Mailing Address 2698 McLeod Dr
 City Maxton State NC Zip 28364
 Phone: 910-284-9684 Email: NA

Gas Company Quality Oil and Gas
 Mailing Address P.O. Box 949
 City Laurinburg State NC Zip 28353
 Email: jparker@qualityoilandgas.com Phone: 910-276-6045

Maximum of \$1500.00 per customer location per 12 month period

Description	Amount per unit	Number of units	Model number(s)	Serial number(s)	Total
Propane furnace, or gas pack <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$250				
Propane-fueled vented room heater or wall furnace <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$150				
Propane-fueled tankless water heater <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$150				
Propane-fueled storage-type water heater <input type="checkbox"/> New <input checked="" type="checkbox"/> Replacement	\$150	1	G6-S4640 PVR 401	2609147218484	\$150.00
Dual fuel heat pump with propane as one fuel (includes hydronic) <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$250				
Propane-fueled cook top/range <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$50				
Propane-fueled clothes dryer <input type="checkbox"/> New <input type="checkbox"/> Replacement	\$50				
Maximum \$1500.00				Grand Total	\$150.00

Required Signatures and Dates

Company Owner/Manager/ or Technician's signature:

I, Justin Decker, certify that the required tests were performed in compliance with all applicable laws and regulations governing the installation.

Date of Inspection: 4-16-2026

Check here if install is new home contractor construction (No receipt required)

Name of Builder/Contractor NA

(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 flow and lock up test on the regulator[s]. The propane marketer agrees to comply with all laws, rules and regulations governing the installation of 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 rebate, makes no representation, warranty or guarantee regarding the qualifying appliance(s) or the associated gas system. The Southeast Propane 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