



# Residential Refrigerator Recycling Rebate Application Form

Use the form below to fill in your account information and information about the rebate program you are applying for. Once you've completed the form, **PRINT THE FORM, SIGN IT,** and submit it with proof of recycling to:

**Riverside Public Utilities - Programs & Services - 3025 Madison St. Riverside, CA 92504**

Failure to provide complete customer information, signature(s), model numbers, or receipt copies may result in processing delays. Please allow 4-6 weeks for processing. Rebates will appear as a credit on your RPU billing statement.

## Customer Information

Name on Utility Account	<input type="text"/>	Account #	<input type="text"/>	
Address	<input type="text"/>	Zip Code	<input type="text"/>	Phone <input type="text"/>
Mailing Address (If different)	<input type="text"/>	Zip Code	<input type="text"/>	

Date Recycled	Item / Appliance	Make	Complete Model #
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

Recycler (you must include proof of recycling)

I certify that I am the owner(s) or tenant(s) of the real property where the appliance(s) was removed, and that the foregoing information is true and correct. I also certify that the appliance(s) is operable and that it was recycled by a certified recycler. I further agree to indemnify and hold harmless the City of Riverside, its officers, employees, and agents from any damages related to my use of this program.

**Signature of Applicant** \_\_\_\_\_ Date \_\_\_\_\_

**Signature of Owner** \_\_\_\_\_ Date \_\_\_\_\_  
(If Applicant is renter or tenant)

### FOR OFFICE USE ONLY

JL Key	6020109080	Object	456200	Rebate Amount	
Certification of Delivery		Approved for Payment		Approved for Payment	
Signature		Department Head		Finance Department	
Date		Date		Date	

**RPU Inspector Information:**

Date Inspected \_\_\_\_\_ By \_\_\_\_\_ Notes \_\_\_\_\_