

RESIDENTIAL WINDOW FILM PROGRAM

Please complete the entire form for incentive processing.

Shaded areas to be completed by Tampa Electric

PREMISE #	REQUEST #
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Customer Name _____ Installation Date _____
Phone (____) _____

Address _____

City _____ State _____ Zip _____

Product Name _____ Manufacturer's Name _____ Manufacturer's rated shading coefficient: _____ External shading: <input type="checkbox"/> None <input type="checkbox"/> Partial <input type="checkbox"/> Proof of purchase attached (invoice, purchase order, work order; incentive will not be processed without proper documentation)	Please provide square footage by qualifying orientation: (North and South facing windows do not qualify) East _____ sq. ft. West _____ sq. ft. Total sq. ft. _____ Incentive calculation: (maximum amount \$200) Total sq. ft. _____ x \$1.00 = Incentive \$ _____ <i>Window film will not be required for eastern or western orientations that have no exposure (e.g., an east facing window located under a porch/lanai).</i>
HVAC type: <input type="checkbox"/> Heat Pump <input type="checkbox"/> Strip Heat <input type="checkbox"/> Gas <input type="checkbox"/> Oil HVAC Equipment Age: _____ years	

Contractor Name _____ Phone (____) _____

Contractor Signature _____ Date _____

The signature above certifies the above information is correct and the materials installed is in accordance with program standards. (If self installed, this area does not need to be completed.)

I certify that all statements made in this application are correct to the best of my knowledge, and agree to the terms and conditions of this program set forth on the reverse side of this application.

Customer Signature _____ Date _____

Customer Name (Print) _____

Verification Results

Office/Field approved: Yes No Incentive calculation: (maximum amount \$200)
Total sq. ft. _____ x \$1.00 = Incentive \$ _____

Tampa Electric Representative _____ Date _____

Comments _____