



# PROPANE STAR/SUPERSTAR HOME REBATE APPLICATION

To apply for a Propane Star Home rebate, please fill in all applicable information and attach a copy of required supporting documentation (well-documented work order, Gas Appliance Check or Propane Safety Check form). If assigning rebate to dealer, attach Dealer Assignment Form. Any omissions and/or errors will delay the rebate process. Limited funds available on a first-come, first-serve basis. Call 800-64-CLEAR for fund availability.

Please check type of rebate:

- Star Home Complete Section A
- SuperStar Home Complete Section A & B

Your application **must be** postmarked within **30 days** of the date the gas is turned on.

Applicant Name:	Date Gas Turned On:
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(COMPLETE APPLICANT INFORMATION ON SECOND PAGE)

**APPLIANCE/EQUIPMENT INFORMATION - Please Print or Type**

**A. NEW PROPANE APPLIANCE/EQUIPMENT INFORMATION:**

Furnace	Propane Brand :	Model Number :	Serial No. :
Water Heater	Propane Brand :	Model Number :	Serial No. :
* Dryer	Propane Brand :	Model Number :	Serial No. :
Appliance Type: <b>(Circle one)</b>	Gas Range • Gas Cooktop • Gas Oven • Gas Logs Hard-piped gas grill • Hard-wired gas generator		
	Propane Brand :	Model Number :	Serial No. :

**B. TO QUALIFY FOR SUPERSTAR HOME REBATE, THE FOLLOWING APPLIANCES ARE ALSO REQUIRED:**

2 <sup>nd</sup> Furnace	Propane Brand :	Model Number :	Serial No. :
2 <sup>nd</sup> Water Heater	Propane Brand :	Model Number :	Serial No. :

**\* CAPPED DRYER OPTION: Please note on attached documentation if capped and provide additional furnace information below.**

Additional Furnace	Propane Brand :	Model Number :	Serial No. :
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# PROPANE STAR/SUPERSTAR HOME REBATE APPLICATION

**FOR RRC USE ONLY**

TRK # :	Date :	Initial :	Verified by :
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**APPLICANT INFORMATION - Please Print or Type**

Applicant Name :		Daytime Phone :
Installation Location (Physical Location, no PO Box) :		
City / State / Zip :		
Mailing Address (If different) :	City / State / Zip :	
<i>I hereby agree not to modify the equipment for a period of five years from the date of installation in any way that would materially impair the equipment's performance with respect to energy conservation, energy efficiency or air quality. I further agree not to remove the installation from service for five years. I consent to the on-site examination of the above installation by an employee, inspector or agent of the Commission for the purpose of verifying that the equipment was installed in compliance with the requirements of this program and all applicable RRC LP-Gas safety rules, and remains in compliance with these agreements.</i>		
Applicant Signature :	Date :	
Social Security # :	Business or Tax Identification # :	

FOR BUILDERS ONLY: SPEC HOME: YES  NO  COMMUNITY PROPANE SYSTEM: YES  NO

PLEASE CHECK ONE:

LIMITED PARTNERSHIP     TEXAS CORPORATION     SOLE OWNERSHIP

List File/Charter # : \_\_\_\_\_

WARNING: Flammable Gas. The installation, modification, or repair of an LPG system by a person who is not licensed or registered to install, modify, or repair an LPG system may cause injury, harm, or loss. Contact a person licensed or registered to install, modify, or repair an LPG system. A person licensed to install or repair an LPG system may not be liable for damages caused by the modification of an LPG system by an unlicensed person except as otherwise provided by applicable law.

**PROPANE COMPANY INFORMATION - Please Print or Type**

Licensed Company Name :		RRC License Number :
Address :		
City / State / Zip :		Daytime Phone :
<i>Pursuant to Texas Administrative Code 16 TAC §15.101, et seq., I understand and agree to all rules and conditions for participation in the Commission's propane consumer rebate program. I acknowledge that the equipment installed at this location is eligible for a rebate and that the installation meets all Railroad Commission rules and regulations. I hereby declare that I am authorized to sign this application, and that the information stated herein is true, correct, and complete to the best of my knowledge. I understand that as a Category E licensee, active company representative on file with the LP Gas Section of the Railroad Commission of Texas, I am responsible for ensuring that safety inspections performed by the company's representatives comply with RRC rebate program requirements, and that by signing a rebate program application I am affirming that the installation passed the safety inspection as defined in 15.105 and required in 15.120(3) of the Rebate Program Rules.</i>		
Signature of Company Representative Performing Safety Inspection :		Date :
Printed Name of Company Representative Performing Safety Inspection :		
<i>Signature of Category E licensee, active company representative on file with the LP Gas Section of the Railroad Commission of Texas (below) :</i>		
Signature :		Date :

**RETURN TO:**

Railroad Commission of Texas  
 Alternative Fuels Research & Education Division  
 PO Box 12967 \* Austin, TX 78711-2967

If you need any assistance filling out this application or have any questions, please feel free to contact our rebate section at 800-64-CLEAR.