

Ultra-Low Temperature (ULT) Freezer Rebate Application



Complete this form and email to sustainability@upenn.edu with required documentation using the subject "ULT Rebate Application".

Applicant Information:

Name:	Date Submitted:
Email Address:	
Department/Center/Institute/program/office/unit/etc.:	
School/Division/Vice Provost/etc.:	
Type (select one): <input type="checkbox"/> Freezer Recycling <input type="checkbox"/> Freezer Replacement <input type="checkbox"/> New Freezer Purchase	

Freezer Information: Complete the section corresponding to the requested rebate type.

Freezer Recycling Rebate

Attach proof of freezer recycling (certificate of recycling and receipt).

Freezer Recycler (if applicable): <input type="checkbox"/> eForce Recycling <input type="checkbox"/> Elemental, Inc. <input type="checkbox"/> Other: _____
Freezer Location (building name and room number):

Freezer Replacement Rebate

Attach proof of freezer purchase and proof of freezer recycling (certificate of recycling and receipt).

Efficiency (select one): <input type="checkbox"/> < 350 watts/day/cu-ft <input type="checkbox"/> 351-500 watts/day/cu-ft <input type="checkbox"/> > 501 watts/day/cu-ft
New Freezer Location (building name and room number):
Freezer Recycler (if applicable): <input type="checkbox"/> eForce Recycling <input type="checkbox"/> Elemental, Inc. <input type="checkbox"/> Other: _____
Recycled Freezer Location (building name and room number):

New Freezer Purchase Rebate

Attach proof of freezer purchase.

Efficiency (select one): <input type="checkbox"/> < 350 watts/day/cu-ft <input type="checkbox"/> 351-500 watts/day/cu-ft <input type="checkbox"/> > 501 watts/day/cu-ft
Freezer Location (building name and room number):

Funding Information:

Budget Code:	Expected rebate amount (\$):
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