

Customer Rebate Application Instructions

This Customer Rebate Application is required for participation in the Commercial Prescriptive Rebate Program (Rebate Program) for projects installing qualifying non-lighting measures. The Lighting Workbook required for lighting projects is available online at www.empowerSCbusiness.com.

Complete participation information and eligibility specifications are included in the 2026 Commercial Prescriptive Rebate Program Manual, also available at www.empowerSCbusiness.com.

This Customer Rebate Application packet contains the following parts:

- General Information
- Rebate Payment Information
- Rebate Worksheet

To participate in this Rebate Program, please follow the following steps:

1. Read the 2026 Program Manual for a complete description of program eligibility requirements and the participation process.
2. **Read** the Terms and Conditions document and sign.
 - Signing the Terms and Conditions document accepts the terms and conditions of this Rebate Program.
3. **Purchase and Install** qualifying equipment and/or initiate and complete work between December 1, 2024 and November 30, 2026
4. **Complete** the following forms included with this Customer Rebate Application:
 - **General Information** – Include all required customer and account information.
 - **Rebate Payment Information** – Rebates will be mailed to customer's electric account billing address. If customer would prefer for the check to be designated to someone other than the customer, complete the Payment Release Information on page three of this Customer Rebate Application.
 - **Rebate Worksheet** – Include all required product information including: product type, install date, dealer name, manufacturer, model number(s), efficiency, size, quantity, and rebate amount. Dealers or contractors may assist with the completion of the rebate worksheet.
5. **Complete** any required supplemental forms for the energy efficiency measures being installed, if applicable.
6. **Submit** a current W9 form for the customer applying for the rebate.
7. **Retain** a copy of all completed Customer Rebate Application forms and all required documentation, such as invoices and contracts. Submitted Customer Rebate Applications will become the property of Santee Cooper.

Submit the completed forms and required documentation, including dated sales receipt or invoice, by November 30, 2026 to:

Santee Cooper Energy Services
305-A Gardner Lacy Road
Myrtle Beach, SC 29579

Email: commercial.energy@santeecooper.com

Please enter in email subject line – **SECURE: Rebate Application**

For More Information. For more information about this Rebate Program, measure eligibility, rebates, or other Santee Cooper programs please contact us:

- **Website:** www.empowerSCbusiness.com
- **Trade Ally Portal:** www.empowerSC4business.com
- **Email:** commercial.energy@santeecooper.com
- **Phone:** (843)347-3399 ext. 3910 (Horry and Georgetown Counties)
and (843)761-8000 ext. 3910 (Berkeley County)

General Information

Important: This form is not for lighting projects. For lighting projects, please use the Lighting Workbook. (Note: Retrofit lighting projects **REQUIRE** pre-inspection before work can be started.)

Energy efficiency measures must be purchased, installed, and/or completed at a qualifying customer facility **prior** to submitting the Customer Rebate Application unless otherwise noted in the Equipment Catalog. Please allow 6 weeks for the Customer Rebate Application and rebate processing following complete documentation submittal and post-installation inspection procedures. Rebates will not be paid for ineligible or incomplete Customer Rebate Applications.

Business Name (as it appears on Santee Cooper Bill)

Federal Tax ID (EIN) or Social Security #

Santee Cooper Account Number(s) where measure(s) to be installed (location on Santee Cooper Bill)

Santee Cooper Meter Number(s) where measure(s) to be installed (location on Santee Cooper Bill)

Address where measure(s) to be installed

City

State

Zip

Contact Name

Contact Phone Number

Contact Email Address

Electronic Account Billing Address (if different from the installation address)

City

State

Zip

Is Contractor a Santee Cooper Trade Ally? ☐ Yes ☐ No

Contractor Name

Building Information

Primary building use:

☐ Automotive Facility

☐ Convention Center

☐ Court House

☐ Dining: Bar Lounge/Leisure

☐ Dining: Cafeteria/Fast Food

☐ Dining: Family

☐ Dormitory

☐ Exercise Center

☐ Gymnasium

☐ Health Care - Clinic

☐ Hospital

☐ Hotel

☐ Library

☐ Manufacturing Facility

☐ Motel

☐ Motion Picture Theater

☐ Multi-Family Housing

☐ Museum

☐ Office

☐ Parking Garage

☐ Penitentiary

☐ Performing Arts Theater

☐ Police/Fire Station

☐ Post Office

☐ Religious Building

☐ Retail

☐ School/University

☐ Sports Arena

☐ Town Hall

☐ Transportation

☐ Warehouse

☐ Workshop

☐ Other _____

Building Size: _____

Number of Floors: _____

Year Built: _____

Percent Conditioned: _____

Operating Hours: _____

Temperature Set-points:

Heating

Cooling

Occupied

_____ °F

_____ °F

Un-occupied

_____ °F

_____ °F

Rebate Payment Information

Mail rebate check to: ☐ Billing Address ☐ Other (complete release below)

Rebate check reference (15 character maximum)

3rd Party Release (Payment Release Information)

Important: Complete this section only if rebate payment is to be directed to someone other than the customer indicated above. Please note that the federal government may require that a 1099 be issued to you, the customer, for the rebate amount paid to your contractor. Please consult with your tax professional for tax implications.

I AM AUTHORIZING THIS REBATE PAYMENT TO THE THIRD PARTY NAMED BELOW AND I UNDERSTAND THAT I WILL NOT BE RECEIVING THE REBATE PAYMENT CHECK FROM SANTEE COOPER. I ALSO UNDERSTAND THAT MY RELEASE OF PAYMENT TO THE THIRD PARTY DOES NOT EXEMPT ME FROM THE REBATE REQUIREMENTS OUTLINED IN THE APPLICATION.

Authorized by (please print)

Signature of Authorized

Date

Check should be made payable to:

Payee Business Name

Contact Phone Number

Payee Federal Tax ID (EIN) or Social Security Number

Payee Mailing Address

City

State

Zip

Rebate Worksheet

Important: This form is to be completed and submitted to Santee Cooper with the Customer Rebate Application. Please refer to the Equipment Catalog(s) for measure eligibility requirements, rebate amounts and codes. Dealers or contractors may assist in the completion of this form. Attach additional sheets as necessary.

Parameter	Measure 1	Measure 2	Measure 3
Equipment code			
Project type (Retrofit or New Construction)			
Installation date			
Facility Location (Distance from oceanfront)			
Location of installed measure (e.g. roof, mechanical room)			
EE Measure end use (e.g. supply fan, CHW pump)			
Age of replaced equipment (for retrofits)			
Replaced (existing) equipment Manufacturer			
Replaced (existing) equipment Model number			
New equipment Dealer name			
New equipment Manufacturer			
New Equipment Model number			
Annual operating hours ¹			
Efficiency(ies) (as described in Equipment Catalog)			
EE Measure size (as described in Equipment Catalog)			
EE Measure rebate (\$) (e.g. HVAC: \$50/ton*10 tons=\$500)			
Number of measures			
Total rebate (\$) (# of Measures*Measure Rebate)			

¹IF VFD application, please specify the equipment schedule(s)

**Total rebate amount may not exceed 50% of the eligible project cost.

Customer Rebate Application Checklist

Before submitting this Customer Rebate Application please verify the following:

1. Did you read and understand the eligibility requirements in the Equipment Catalog?
2. Have you included a dated sales invoice?
3. Did you attach any additional documentation listed in the Equipment Catalog?
4. Did you include your account number?
5. Did you sign the Terms and Conditions Form?