



Home Efficiency Rebate Plus Authorization Form

I (homeowner) _____ authorize that the Payee
(if Condo Corp include Corp #): _____

is responsible for my property and can apply to receive rebates from HER+ offering. The property is as follows:

Address: _____ Unit: _____

City: _____ Postal code: _____

By signing below, I confirm the above.

File D Id #: _____

Date: _____

Signature: _____

Payee/Condo Corp must adhere to all HER+ terms and conditions. Cheque Mailing address (to be filled out by payee):

Address: _____ Unit: _____

City: _____ Postal code: _____