

To,
Executive Officer (EE&REM),
Department of Environment, 1st Floor, DFC building,
37-38, Pankha road, Institutional Area, D-Block,
Janakpuri, New Delhi-110058

Subject:: Claim for release of rebate / incentive of Rs.6000/- as per letter No. F.11(149)/2006-Power/Pt-II/1072 dated 30-04-2007 of Assistant Director (Power), GNCTD

Purchaser (Consumer) Information:

- a) Name of Purchaser / Consumer:
- b) Father's / Husband's Name:
- c) Address:
Contact No.:
- d) CRN No. / K. No. of Consumer:
Name of DISCOM: BYPL ☐ / BRPL ☐ / NDPL ☐ / NDMC ☐ / MES ☐
- e) Whether copy of latest paid electricity bill is enclosed? Yes ☐ / No ☐.
- f) If a copy of electricity bill is enclosed, whether Consumer has signed on it? Yes ☐ / No ☐.
- g) Whether the electric connection is domestic? Yes ☐ / No ☐.
- h) Whether the connection is in the name of purchaser / consumer? Yes ☐ / No ☐.

1. Solar Water Heater System:

- a) Name of Manufacturer / Supplier:
- b) Whether the Manufacturer / Supplier is BIS / MNRE approved? Yes ☐ / No ☐.
- c) If sold by dealer: If Yes
Name of Dealer:
Address of Dealer:
- d) Whether the dealership certificate is enclosed? Yes ☐ / No ☐.
- e) Capacity of SWH (in LPD):L/D
- f) Type of SWH: FPC based ☐ / ETC based ☐.
- g) Number of Plates / Tubes:Plates ☐ / Tubes ☐.
- h) Bill / Invoice No. & Date:
- i) Whether Bill / Invoice is enclosed? Yes ☐ / No ☐.
- j) Date of installation of SWH:
- k) Whether commissioning report is enclosed? Yes ☐ / No ☐.
- l) Warranty period of equipment supplied:
- m) Is the equipment having built-in electrical back up: (Yes ☐ / No ☐.
- n) Is the equipment fitted with Heat Exchanger: (Yes ☐ / No ☐.
- o) Is the equipment having Non Return Valve (NRV): (Yes ☐ / No ☐.
- p) Whether insulated pipes up to utility points have been fitted: (Yes ☐ / No ☐.
- q) What kind of water is being used by the purchaser for Solar Water Heater (DJB supply water ☐ / Ground Water through Bore Well ☐.
- r) Whether Annual Maintenance Contract (AMC) of SWH is done. (Yes ☐ / No ☐.

s) If the answer to above question is 'yes'. Please specify the period of AMC

t) Bank Particulars of Manufacturer / Supplier / Dealer (as the case may be):

Name & Address of Bank:

Account No.: _____ MICR Code: _____ (9 digit)

u) Whether a canceled Cheque of the above bank account is enclosed? Yes ☐ / No ☐.

Signature of Authorized Signatory of Manufacturer

Supplier / Dealer with Seal:

Name of Authorized Signatory: