

## Customer Participation Form

Appliance Recycling | 833-202-3660

BGE Smart Energy Savers Program®

**ATO#**

Please write legibly so we can process your rebate check.

Event Date	Rebate (list quantity) [ ] Room A/C(s)      [ ] Dehumidifier(s)      [ ] Mini Fridge			
Customer Name (associated with account)	Account Number	Home Phone	Email	
Address	City	State	ZIP Code	
Payee Address (if different than address above)	Payee City	Payee State	Payee ZIP Code	
How did you hear about today's event? <div><input type="checkbox"/> Electric utility office      <input type="checkbox"/> Facebook      <input type="checkbox"/> Online news <input type="checkbox"/> Utility company website      <input type="checkbox"/> Twitter      <input type="checkbox"/> Repeat customer <input type="checkbox"/> Search engine (Google/Bing)      <input type="checkbox"/> Television news      <input type="checkbox"/> Friend/neighbor <input type="checkbox"/> Email      <input type="checkbox"/> Newspaper      <input type="checkbox"/> Other: _____</div>				

### To be filled out by a BGE program representative

Unit Type	Model#/Year	Brand	Ref Type/BTU	Capacity/Amps

### Terms & Conditions

Baltimore Gas and Electric has contracted with Key Recycling to implement a Residential Appliance Recycling Program. To participate, you must sign this form agreeing to all the terms and conditions listed below.

I certify that I am an electric customer of Baltimore Gas and Electric. I certify that I am the owner (or the owner's authorized representative) of the above appliance(s) and that this ownership is free of liens, security interests or other encumbrances. I further certify that the appliance(s) is/are operable, and I consent to transferring the ownership of the appliance(s) listed above and all waste stream attributes to Key Recycling.

In consideration of my program participation, I hereby release and hold harmless Baltimore Gas and Electric, Key Recycling and their respective employees and subcontractor(s) from any and all claims resulting from the removal of the appliance(s) from my vehicle.

Owner/Representative Signature: X _____	Date: _____
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BGE Smart Energy Savers Program®

EmPOWER Maryland programs are funded by a charge on your energy bill.

EmPOWER programs can help you reduce your energy consumption and save you money.

To learn more about EmPOWER and how you can participate, go to [BGESmartEnergy.com](http://BGESmartEnergy.com)

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