



# Delaware Clean Vehicle Rebate Program Vehicle Rebate Application Form

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Invoice number (internal use)

Division of Energy and Climate  
100 W. Water Street, Suite 5A, Dover, DE 19904  
Phone: (302) 735 - 3480 Fax: (302) 739 - 1840  
Website: <http://www.dnrec.delaware.gov/cleantransportation>  
Email for submission: [DNREC.Transportation@state.de.us](mailto:DNREC.Transportation@state.de.us)

**Vehicle Type (Please circle one):** Battery Electric Plug-in Hybrid V2G Natural Gas Propane Retrofitted

## Applicant/Purchaser Information

Name of Purchaser:

Email:

Daytime Phone:

Cell Phone:

Mailing Address:

City:

State:

Zip code:

Street Address (as it appears on Driver's License): Same as above

City:

State:

Zip code:

Driver's License Number and State (or Business License Number):

## Dealership Information

Name of Dealership:

Contact Person or Salesperson Name:

Email Address (for Dealership Contact Person):

Dealership Mailing Address:

City:

State:

Zip code:

Daytime Phone:

## Vehicle Information

Make:

Model:

Year:

Vehicle Identification Number (VIN):

License Plate OR Temporary Tag Number:

City of Purchase:

## Purchase Information

Date of New Vehicle Purchase:

MSRP of Vehicle:

Total Price Paid (before Delaware Rebate):

Please complete page two of the application

**IF PURCHASER IS RECEIVING REBATE: Purchaser must acknowledge all required documentation, initial each clause in the space provided, sign, and obtain the Dealer Owner/Manager signature:**

**Documents:** The documents listed below must be submitted with your application

- \_\_\_\_\_ State Substitute W-9 Form. Please fillout W-9 ONLINE at <https://w9.accounting.delaware.gov/W9form.aspx>
- \_\_\_\_\_ Final proof of payment submitted (sales slip) - **OR**- Lease agreement (leases must be for no less than 3 years/36 months)
- \_\_\_\_\_ Copy of Delaware State Driver's License, Business License, or Military Proof of Service Letter

**Applicant Declarations:** Please initial next to each statement, signifying that you agree.

- \_\_\_\_\_ I certify that I am a resident of the State of Delaware and the information provided on this application is true and correct.
- \_\_\_\_\_ I have read, understand and agree to the eligibility requirements (found at [www.de.gov/cleantransportation](http://www.de.gov/cleantransportation)).
- \_\_\_\_\_ I understand that rebate funding is limited and subject to availability, and that this application does not guarantee payment.
- \_\_\_\_\_ I understand and accept that rebate processing will take at least 6-8 weeks from the date the Division of Energy and Climate receives a **complete** rebate application.
- \_\_\_\_\_ I understand that only vehicles purchased between November 1, 2016 and June 30, 2018 are eligible for this round of funding under the Clean Vehicle Rebate Program.
- \_\_\_\_\_ I understand that incomplete applications will not be processed and submitting an incomplete application may result in loss of rebate due to limited funding availability.

**Purchaser**

**Dealer Owner or Manager Signature**

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

**IF DEALERSHIP IS RECEIVING REBATE: (Participating Dealership is receiving rebate on the customer's behalf) Dealer must fill out the information below, sign, and obtain the purchaser's signature:**

Name of Participating Dealership: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

State: \_\_\_\_\_

City: \_\_\_\_\_

Zip: \_\_\_\_\_

**The Participating Dealership must submit the following on behalf of the purchaser to ensure rebate payment. The Participating Dealership Owner or Manager must acknowledge submittal of documentation and sign below.**

IF FINANCED/PURCHASED, Final proof of payment (sales slip). **OR**  IF LEASED, lease agreement and terms of lease.  AND a copy of Delaware Driver's License

**For Purchaser: Please transfer this rebate payment to the above named company. I understand that I will not directly receive the rebate payment for this purchase.**

**Purchaser Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Dealer Owner/Manager Signature:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_