

## LADWP COMMERCIAL PROGRAMS VERIFICATION REQUIREMENTS & DISCLAIMER

**LADWP CUSTOMER OF RECORD INFORMATION**

Rebate Application Number(s)	Pre-Verification Date	Post-Verification Date
LADWP Customer Name		
Service Address		
City	State	Zip Code
Verification Contact Name	Title	
Phone Number(s)	Email Address	
Contractor Firm	Contact Name	
Phone Number(s)	Email Address	

The following cellular phone number is designated for the remote verification video call:	Enter 10-Digit Cell Number
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**GENERAL TERMS, CONDITIONS & REQUIREMENTS**

The LADWP customer and/or contractor indicated above (“Parties”), and all signees below, agree to participate in an on-site or remote video pre- and/or post-installation verification associated with the above-referenced LADWP rebate application. All signees of this form acknowledge and accept that LADWP assumes no liability for physical injury, illness, infection or the loss or damage to real or personal property that may occur during or as a result of the actual verifications.

**Parties acknowledge and agree to the following terms, conditions and special requirements:**

- LADWP retains sole ownership of any photographs, screenshots and/or video/audio recordings taken during a remote verification session.\*
- Parties accept the responsibility for the safety and welfare of their respective employees, agents and all other non-LADWP participants and ensure their adherence to all applicable local/state/national building and safety regulations and requirements.
- Parties agree to equip their onsite personnel with the appropriate tools, ladders, lifts or other equipment necessary for accessing lighting, HVAC, refrigeration and/or other electrical equipment specified in the rebate application, regardless of location and/or mounting height.
- Parties agree to assume all non-LADWP labor and non-labor costs associated with the on-site or remote verification session.

*\*Remote verification sessions may be recorded and/or monitored for training and/or quality assurance purposes.*

## LADWP CUSTOMER & THIRD-PARTY CONTRACTOR CERTIFICATION

### LADWP Customer

Print Name	Print Title	Signature <b>X</b>	Date
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### Contractor

Print Name	Print Title	Signature <b>X</b>	Date
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## ON-SITE CUSTOMER/CONTRACTOR SPECIAL CONDITIONS & REQUIREMENTS

### On-site participants acknowledge and agree to the following:

1. Compliance with all effective verification site safety procedures and requirements and,
2. Arrange access in advance of the scheduled verification to locked or restricted areas (e.g., private offices, residential units, operating rooms and ICUs, manufacturing clean rooms, paint booths, etc.). Areas not verified due to access issues may result in the disqualification of the associated efficiency measures.

## ON-SITE CUSTOMER & CONTRACTOR PARTICIPANT CERTIFICATION

### Onsite Representative

Print Name	Company	Signature <b>X</b>	Date
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### Onsite Representative

Print Name	Company	Signature <b>X</b>	Date
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### Onsite Representative

Print Name	Company	Signature <b>X</b>	Date
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### Onsite Representative

Print Name	Company	Signature <b>X</b>	Date
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### Onsite Representative

Print Name	Company	Signature <b>X</b>	Date
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