

Trade Ally Referral Application

Participating Contractor Information

Installation Contractor Name _____
Contractor PeakRewardsSM ID _____
Contractor Phone Number _____
Maryland HVAC License # _____

Residential Customer Information

Customer Name _____
Customer Address _____

Customer Phone Number _____
If available, customer's BGE Account # _____

Installer, please check a box

Reason for referral

- Notification of PeakRewardsSM device removal or disconnect (\$10)
- New PeakRewardsSM Referral (\$25)
- Re-Installation of a PeakRewardsSM Smart Switch (\$50)

For Re-Installation, please provide the following on new unit installed:

Manufacturer _____
Model # _____

For device removal or disconnect, please provide the following:

Device Serial Number _____

Date of PeakRewardsSM
Re-Installation or Referral _____

I have authorized the installation (or re-installation) of a PeakRewardsSM switch and understand that I will receive credits from BGE during the months of June, July, August, and September for each switch installed (or re-installed). Further, I have been informed to call 1-(888)-309-PEAK if I have any questions regarding the PeakRewardsSM Program.

Customer Signature _____