



COOL AIR REBATE PROGRAM CONSUMER APPLICATION

Please fill out this application completely. Incomplete applications cannot be processed.
For a complete list of eligibility requirements, please visit CoolAirRebate.org.

Vehicle Owner Information

Last Name: _____ First Name: _____ M.I.: _____

Mailing Address: _____ Apt. : _____

City: _____ State: _____ Zip: _____

Daytime Phone #: _____ Email Address: _____

Vehicle Information

Vehicle Year (1993-2019): _____ Make: _____ Model (Optional): _____

California License Plate #: _____

For Additional Vehicles if Necessary (Optional)

Vehicle Year (1993-2019): _____ Make: _____ Model (Optional): _____

California License Plate #: _____

Vehicle Year (1993-2019): _____ Make: _____ Model (Optional): _____

California License Plate #: _____



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Eligibility Information

The Cool Air Rebate program is open to individuals who currently receive certain government benefits **OR** have an income that is less than 200% of the Federal Poverty Guidelines.

Eligibility Based on California/Federal Assistance Programs

I am currently enrolled in the following state and/or federal programs:

- Medi-Cal CalFresh/SNAP CalWorks California Healthy Families

Income-Based Eligibility

Complete this section and provide documentation of your income.

Gross Household Income is: \$ _____ **Monthly** **Yearly**

Number of People (including yourself) Living in the Household is: _____

To verify your income, include with your application either 1) a copy of the most recent **pay stub** for all adults in your household or 2) a copy of the most recent **W-2 form** for each adult in your household.

Please visit CoolAirRebate.org for a complete list of eligibility requirements and the Privacy Notice for this program. Participating Repair Shops can provide you with a physical copy on request.



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Terms of Program

Program. The Cool Air Rebate program (“Program”) is designed to cover a portion of the cost for diagnosis and repair of leaking MVAC systems using R134a refrigerant performed at Program approved facilities (“Qualifying Repair”) for individuals whose applications are approved and who receive a letter of eligibility from the Car Care Council (“Approved Consumers”). A complete description of the Program can be found at <http://www.coolairrebate.org/>.

Additional Costs. Approved Consumers are responsible to pay 20% of the cost of a Qualifying Repair (or, if no Qualifying Repair is performed, to pay 20% of the cost of diagnosis) and the full amount of any charge over \$1,500.00. The Program will not cover the cost for diagnosis or repair associated with any other problem with an Approved Consumer’s vehicle.

No Guarantee of Benefit. Financial assistance is based on the availability of funds. You are not guaranteed to receive financial assistance unless and until you receive approval and a letter of eligibility from the Program. The Program will not cover work performed on your vehicle prior to your receipt of a letter of eligibility.

Right to Refuse Repair. An Approved Consumer is entitled to refuse to allow a Qualifying Repair of the vehicle at any point up to the start of the repair.

Relationship with Repair Shop and Liability. Any agreement to repair your vehicle is exclusively between you and the relevant repair shop. You are not a party to nor a third-party beneficiary of any agreement between the Car Care Council and any repair shop. The Program is not responsible for, nor will it participate in, dispute resolution between Approved Consumers and any repair shop. You agree to release, indemnify, defend, and forever discharge the Program and the Car Care Council from all liability, claims, demands, damages, costs, expenses, and causes of action arising from or relating to the actions of any repair shop, including but not limited to, the diagnosis or repair of your vehicle.

By signing below, you:

- Agree to be bound by the Terms of the Program.
- Represent and warrant that you have the authority to authorize repair on the vehicle listed on this application.
- Acknowledge that the information that you provide as part of the Program will be collected, used, stored, and otherwise processed in accordance with the Program Privacy Notice.
- Understand that your application materials may be shared with government agencies or third parties for the purpose of administering the program.
- Declare under penalty of perjury under the laws of the State of California, that to the best of your knowledge, the information on this application is true and correct.
- Understand that submitting false information may result in a criminal conviction in addition to civil penalties, and that you will not be eligible to receive future assistance from the Program.

Vehicle Owner

Print Name: _____

Signature: _____ Date: _____



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Cool Air Rebate Program Income Eligibility Requirements

Household/ Family Size	Monthly Income (at or below)	Annual Income (at or below)	Household/ Family Size	Monthly Income (at or below)	Annual Income (at or below)
1	\$2,510.00	\$30,120	8	\$8,786.67	\$105,440
2	\$3,406.67	\$40,880	9	\$9,683.33	\$116,200
3	\$4,303.33	\$51,640	10	\$10,580.00	\$126,960
4	\$5,200.00	\$62,400	11	\$11,476.67	\$137,720
5	\$6,096.67	\$73,160	12	\$12,373.33	\$148,480
6	\$6,993.33	\$83,920	13	\$13,270.00	\$159,240
7	\$7,890.00	\$94,680	14	\$14,166.67	\$170,000

Program income requirements are based on 200% of the 2024 federal income poverty level.

SEND VIA MAIL TO:

Cool Air Rebate Program, 901 H Street Suite 120, PMB 1049,
Sacramento, CA 95814

QUESTIONS?

CALL: (888) 534-4728
VISIT: CoolAirRebate.org
EMAIL: info@coolairrebate.org