



# HVAC Energy Management

## Reduce Energy Consumption



*Rebate Available!*

### WHY WASTE ENERGY

About 50% of the energy used in hotels is in Guest Rooms.

About 60% of the energy used in classrooms is when the classroom is not occupied

With **GEM Link™ Wireless** HVAC Energy Management, schools, universities, hotels & motels can reduce energy consumption.

### HOW IT WORKS

**GEM Link™ Wireless** reduces dorm room, class room, hotel & motel guestroom HVAC energy consumption **35% to 45%** by resetting room temperature to an energy conserving level, pre-selected by the management, only while the occupants are out of the room.

### IT'S CONVENIENT

Not only will your utility costs be dramatically reduced, but now you can easily shut down the HVAC in rooms that aren't occupied for extended periods of time.

### IT'S EASY

**GEM Link™** uses the reliable ZigBee wireless protocol and consists of wireless passive infrared (PIR) occupancy sensors, wireless door switches, and a transceiver control module connectable to any HVAC unit. Since **GEM Link™ Wireless** is compatible with any HVAC system of any voltage with any type thermostat unit of any age, the system can be installed in every guestroom or classroom.

### START SAVING with Energy Efficiency

**El Paso Electric** is pleased to offer a rebate to help you save energy and reduce your costs with Lodging Technology. **El Paso Electric's Lodging Technology rebate** will pay for a large portion of the equipment cost. See **Request Form**, on reverse side, for more details.



## El Paso Electric HVAC Energy Management REQUEST FORM

To have your GEM Link™ Wireless installed you must contact EPE prior to installation for project pre-approval. For pre-approval simply call (915) 521-4636 or scan and email this completed form to [walter.guerrero@epelectric.com](mailto:walter.guerrero@epelectric.com). Installation must be performed by an EPE approved contractor.

Business Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact's Telephone: \_\_\_\_\_ Contact's Email: \_\_\_\_\_

EPE Account Number: \_\_\_\_\_

Service Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Mailing Address: (If different from above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

### GUESTROOM INFORMATION

Number rooms: \_\_\_\_\_

Number of HVAC Units per Room: \_\_\_\_\_

Total Units: \_\_\_\_\_

*\*Rebates are issued on a first come, first served basis until funding is exhausted or the program is changed.*

El Paso Electric's HVAC Energy Management rebate is only one of several ways El Paso Electric can help you save money. To learn more about our programs go to [www.epelectric.com](http://www.epelectric.com) or simply call (915) 521-4636

## El Paso Electric HVAC Energy Management



Business Name: \_\_\_\_\_ Contact Name: \_\_\_\_\_

Contact's Telephone: \_\_\_\_\_ Contact's Email: \_\_\_\_\_

EPE Account Number: \_\_\_\_\_

Service Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

Mailing Address: (If different from above) \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP Code: \_\_\_\_\_

**ROOM INFORMATION**

Number rooms: \_\_\_\_\_

Number of HVAC Units per Room: \_\_\_\_\_

Total Units Converted: \_\_\_\_\_

**CONTRACTOR INFORMATION (Must use EPE approved contractor)**

Company Name: \_\_\_\_\_ License # : \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**OPTIONAL PAYMENT RELEASE AUTHORIZATION (signed by owner or authorized company representative)**

By signing below I am authorizing the payment of the rebate to the contractor (named above) and I understand that I will **not** be receiving the incentive payment from EPE.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPLICANT ACKNOWLEDGEMENT (signed by owner or authorized company representative)**

By signing below, I acknowledge that: (1) the equipment listed herein has been installed to my satisfaction; (2) if contacted by EPE, I agree to allow access to my property to inspect the equipment; (3) EPE does not assume any liability whatsoever relating to the equipment installed, its installation or performance and (4) all information provided in this application form is accurate to the best of my knowledge.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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