



LED Lightbulb Replacement Program for City of Lompoc Electric Customers

Name (First & Last): _____

Installation Address Type: Residential Commercial Industrial

Utility Account Number: _____

Address where replacement LED bulbs will be installed:

Quantity of Lightbulbs Recycled: _____ bulbs

Total Wattage of Lightbulbs Recycled: _____ watts

Quantity of Lightbulbs Requested: _____ bulbs

I hereby certify that:

1. I am a City of Lompoc Utility Customer and pay for electric utility services,
2. I will install the replacement LED light bulbs at the address listed above, and
3. I hold the City of Lompoc harmless for any defects of these manufactured products and/or issues caused by the use of replacement LED bulbs.

Customer Signature: _____ Date: _____

For Office Use Only:

Received by: _____

Employee Signature: _____

Date: _____