



ENERGY STAR WATER HEATER & ROOM AIR CONDITIONER REBATE APPLICATION

Member must: 1) Complete application in full 2) Sign 3) Submit with COPY of receipt within 90 days of purchase

Version 2.2 Jan 1, 2012

SECTION A

Name: _____ Co-op Account # _____

Address where appliance will be installed: _____

City _____ State _____ ZIP _____ Phone _____

Mailing address (if different than the installation address): _____

City _____ State _____ ZIP _____ Phone _____

E-Mail address _____

Recipients of rebates may be requested to participate in a future survey by e-mail invitation or by phone.

SECTION B

WE WOULD LIKE TO KNOW SOME INFORMATION ABOUT YOU AND YOUR HOME:

A. Is this for a new home? Yes Replacement of an existing appliance? Yes

B. What type of water heater do you have? Electric Gas

C. How many people live in the home? _____

D. What type of **dwelling structure** is the appliance installed at? (check one)

Single family house House w/ Farm Multi-unit dwelling Manufactured (single/double) Other

D. Did this rebate influence your decision to buy the appliance? Not at all Very Much

1 2 3 4 5

E. How did you hear about our rebates? (check one)

Radio advertisement Television advertisement Cooperative Newsletter

Cooperative Mailing Cooperative Employee Contractor or Builder Newspaper advertisement

Other _____

I certify that the appliance(s) listed are qualifying ENERGY STAR® appliances and that they will be installed at the address listed above. I agree to allow a representative of the Cooperative to verify the appliance installation at the above address.

Signature: _____ Date: _____

APPLIANCE TYPE	Must complete section below. If new unit is a replacement and old unit is not available, please write in brand name & age.	
NEW APPLIANCE	ENERGY STAR® Water Heater	ENERGY STAR® Room Air Conditioner
BRAND NAME		
MODEL NUMBER		
REBATE AMOUNT		
OLD APPLIANCE		
BRAND NAME		
MODEL NUMBER		
SERIAL NUMBER		

Instructions:

- Please allow 6-8 weeks for processing. Limit one rebate per appliance. Please keep a copy for your records.
- The appliance must be installed where electricity is supplied by the Cooperative.
- You must include a copy of the original dated sales receipt with this application.
- Include your account number and sign the form.
- Please complete a separate application for each installation site.
- Incomplete applications will not be processed for rebates.
- Recipients of rebates may be requested to participate in a future survey by e-mail invitation or by phone.
- **Submit completed application and sales receipt within 90 days of purchase to your local electric cooperative.**

For Cooperative Use Only

Date Received _____ Receipt on File Approval Signature _____