

INCENTIVE APPLICATION

FOR HEAT PUMP or CENTRAL A/C—PLEASE ATTACH COPY OF RECEIPT



UDWI REMC recommends the installation of an energy management device on the equipment. To indicate your agreement to have an energy management device installed by a person or persons designated by the REMC, please initial here _____.

MEMBER INFORMATION

Name _____ Co-op Account _____

Address where appliance will be installed

City _____

State _____ Zip _____

Mailing address (if different from installation address)

City _____

State _____ Zip _____

Phone _____ Email _____

How do you want to receive your incentive?(check one) check credit to REMC account

EXISTING HEATING & COOLING EQUIPMENT

A. Information about the home where equipment will be installed: New _____ Existing _____

Year built _____ Sq. Ft. _____ No. of people living in the home _____

(check one) Single family house House w/Farm Multi-unit dwelling

Manufactured (single/double) Other

B. How did you hear about our incentives? (check one)

Radio Ad TV Ad Electric Consumer Mailing

Co-op Employee Contractor/builder Newspaper Ad Other

C. Did this incentive influence your decision to buy the appliance? (check one) Yes ___ No ___

D. What type of heating system is being replaced (if applicable)? (check one)

Gas-Forced Air Electric-Forced Air Electric Baseboard Wood

Heat Pump, Dual Fuel, SEER _____ Heat Pump w/Electric Backup, SEER _____

Ground Source Heat Pump, EER _____ Other _____

E. What type of cooling system is being replaced? (check one)

Central Air Conditioning, SEER _____ Window Air Conditioners (how many? _____), Age _____

Heat Pump, Dual Fuel, SEER _____ Heat Pump w/Electric Backup, SEER _____

Ground Source Heat Pump, EER _____ None

F. If installing a heat pump, what type of back-up (supplemental) heating do you have? (check one)

Electric Propane Natural Gas Other _____

NEW HEAT PUMP or CENTRAL AIR UNIT

Manufacturer _____ Model # _____

Serial # _____ SEER _____

Capacity in Tons _____ Installation Date _____

Backup Capacity (KW or BTU) _____ HVAC Contractor _____

I certify that the equipment information is accurate, including claims of efficiency, size, and HVAC system information. I recognize that the cooperative may verify the information I have provided.

Contractor Signature _____ Date _____

Member Signature _____ Date _____