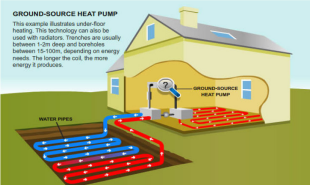


## GROUND SOURCE HEAT PUMP REBATE APPLICATION

Member must: 1) Be in good standing with the Cooperative; 2) Complete application in full; 3) Sign; 4) Submit with COPY of receipt within 90 days of purchase



### MEMBER INFORMATION

Name:			Co-op Account Number:		
Installation Address:					
City:	State:	Zip:	Phone:		
Recipient address:					
City:	State:	Zip:	Install date:		
Email address:			<b>See back of form for terms and conditions.</b>		

**Get a rebate from your electric cooperative!**  
**TERMS AND CONDITIONS APPLY**

**Rebate recipients may be asked to participate in a future survey by e-mail invitation or by phone.**

### RESIDENTIAL INFORMATION *Member must complete this section.*

Check one:	Check one:	Is this rental property?	Did rebate influence your purchase decision?	How many people live in the home?	
Primary Home	New home	Yes	Yes		
Vacation home	Existing home	No	No		
<b>Home type (check one):</b>	Single family	Multi-family	Town home	Condo	Other
<b>Existing method to HEAT your home (check one):</b>	Gas-forced air	Electric-forced air	Electric baseboard	Air source heat pump	Ground source heat pump
<b>Existing method to COOL your home (check one):</b>	Central air	Window air	None	Air source heat pump	Ground source heat pump
<b>Type of BACK UP heating system used by the new system:</b>	Natural gas	Propane	Fuel oil	Electric furnace	
<b>Please estimate the age of the equipment that was replaced:</b>	1-5 years	6-10 years	11-15 years	>15 years	New installation
<b>How did you hear about our rebates?</b>	Radio	TV	Newsletter	Mailing	Employee
	Contractor	Builder	Newspaper	Other	
<b>Geothermal heat pump type</b>	Closed loop, water to air	Open loop, water to air	Closed loop, water to water	Open loop, water to water	
<b>New system with loop only?</b>	Yes	No			
<b>Indoor unit replacement only?</b>	Yes	No			

*Member must complete this section.*

	Install Date	Brand	Model	Serial #	AHRI #	Cooling (Tons)	EER	COP
<b>Unit #1</b>	/ /							
<b>Unit #2</b>	/ /							
<b>Reason for Replacement</b>								

**MEMBER SIGNATURE** (Certifies that the appliance(s)/unit(s) listed meet program requirements and that they are installed at the address listed. I agree that the cooperative may verify installation at the address listed.)

**COOPERATIVE IS RESPONSIBLE FOR MAINTAINING ALL RECEIPTS AND DOCUMENTS RELATED TO THIS APPLICATION**

Cooperative approval signature: