



# Jo-Carroll Energy

Your Touchstone Energy® Cooperative  
The power of human connections®

## RESIDENTIAL ELECTRIC ACCOUNTS Appliances & Lighting 2018 Energy Efficiency Incentive Form

### ELIGIBILITY AND INSTRUCTIONS FOR COMPLETING THIS FORM (Please read)

- ❖ Incentive(s) not to exceed 20% of the cost of efficiency equipment or cost of recycling.
- ❖ ALL incentives will be issued in the form of a bill credit on the submitted member's account.
- ❖ Equipment must be purchased, installed, and/or recycled in 2018.
- ❖ Installed equipment must be on cooperative's lines. (primary source of energy for equipment MUST be electricity)
- ❖ Incentives are in place from January 1, 2018 through December 31, 2018 or until funds are depleted.
- ❖ Please allow 3-5 weeks for your incentive to be processed once proper documentation has been received.
- ❖ Jo-Carroll Energy reserves the right to inspect and verify equipment and installation.
- ❖ All accounts are eligible for only ONE Incentive per appliance/unit within a 5-year time period.
- ❖ Submit ALL documentation listed below no later than 3 months after purchase and **no later than January 3, 2019**.

{however, members are encouraged to submit as soon as possible to ensure incentive}:

- ✓ This Incentive Form.
- ✓ A copy of your receipt or invoice for each item purchased.
- ✓ UPC, Energy Star Label, Energy Guide, and/or another requirement listed in the sections below.

Submit required documentation to: Jo-Carroll Energy • Attn: Member Services Department; Incentive Request • P.O. Box 390 • Elizabeth, IL 61028

### MEMBER INFORMATION (Please fill out entire section)

Member Name			Email		
			<i>I wish to receive digital communications with information about the cooperative, its programs and services.</i> <input type="checkbox"/> Opt Out		
Address			Account	Phone	
City	State	Zip Code	Date	Member Signature	
Incentive for: <input type="checkbox"/> Residential <input type="checkbox"/> Farm <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institution/Government <input type="checkbox"/> Other:					

### INCENTIVE INFORMATION (Please fill in shaded boxes for all items for which you are requesting an incentive)

NEW Equipment	Specifications	Check <input checked="" type="checkbox"/>	Incentive Total:		
<b>NEW ENERGY STAR Appliances</b>					
Clothes Dryer	<b>Must be an ENERGY STAR appliance!</b> Visit <a href="http://www.energystar.gov">www.energystar.gov</a> to verify Energy Star rating.	Include <b>ENERGY STAR label</b> or <b>the yellow energy guide with the Energy Star Designation in the LOWER RIGHT CORNER</b> for each purchased appliance.	<input type="checkbox"/>	\$25	
<b>HEAT PUMP</b> Clothes Dryer			<input type="checkbox"/>	\$50	
Clothes Washer			<input type="checkbox"/>	\$25	
Dehumidifier			<input type="checkbox"/>	\$25	
Dishwasher			<input type="checkbox"/>	\$25	
Refrigerator (≥10 cubic ft.)			<input type="checkbox"/>	\$25	
<b>Recycling</b>					
Freezer	Freezers, refrigerators & window air conditioners must be in working order. And must be removed from service and fully disposed of following federal, state, and local laws.	<b>Receipt for each recycled item required.</b>	<input type="checkbox"/>	\$25	
Refrigerator			<input type="checkbox"/>	\$25	
Window Air Conditioner			<input type="checkbox"/>	\$25	
<b>NEW Lighting</b>					
Occupancy Sensor	<b>Does not include motion detector fixtures</b>		<b>Receipt &amp; UPC Req'd</b>	20% of cost up to \$5/sensor = \$ _____	
LED Lamp	<b>Minimum 5 LED Bulbs must be submitted to qualify for incentive.</b>			20% of cost up to \$1/lamp = \$ _____	
LED Fixture (lumens per fixture based)	_____ = # of LED bulbs	_____ = # of fixtures		_____ = Lumens/bulb	_____ x \$1/800 lumens/fix = \$ _____
LED Exit Sign				_____ x \$5/sign = \$ _____	
<b>Total Incentive Amount Requested</b>				\$ _____	

### OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason:	Class:		<b>Amount</b>	<b>Code</b>
Date of Purchase:	Invoice Amount:			
Member Services Representative:	Date:	<b>Incentive issued:</b>	\$ _____	95 (DPC)
Billing Services Representative:	Date:		\$ _____	94 (JCE)