



ENERGY STAR APPLIANCE REBATE APPLICATION

Version 2.1 Feb 4, 2011

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.**

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

A. Is this a replacement appliance? Yes No

B. What type of water heater do you have? Electric Gas (Rebate does not apply with gas water heater)

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 1 2 3 4 5 Very Much

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.

SECTION B

Signature: _____ Date: _____

Please complete the information on page 2 for each appliance.

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.
- Must be a qualifying appliance. See Rebate Program Summary for further details.
- For clothes washer or dish washer rebates: electric water heating must be present in the home to be eligible

For Office Use Only

Date Received _____ Acct. No. _____ Approval _____

ENERGY STAR APPLIANCE REBATE APPLICATION

Please complete the following information for each appliance:

NEW APPLIANCE	APPLIANCE TYPE				
	ENERGY STAR® Refrigerator	ENERGY STAR® Clothes Washer	ENERGY STAR® Dishwasher	ENERGY STAR® Window Air Conditioner	Water Heater* 90% efficient or better
BRAND NAME					
MODEL NUMBER					
REBATE AMOUNT	\$75.00	\$100.00	\$50.00	\$50.00	\$50.00
OLD APPLIANCE					
BRAND NAME					
MODEL NUMBER					
SERIAL NUMBER					

* The participant agrees to allow the Cooperative to control water heating equipment as a condition of participation.

Instructions:

- Submit completed application and sales receipt within 90 days of purchase to:

**White River Valley Electric Cooperative
Attn: Member Services/Rebate Program
PO Box 969
Branson, MO 65615**

<i>For Office Use Only</i>		
Date Received _____	Acct. No. _____	Approval _____

All account information will be kept confidential between the Cooperative, Associated Electric Cooperative and agents acting on their behalf.