

Mail to: PO Box 98 - Allison, IA 50602 For more information: 319-267-2726 or 888-267-2726 www.butlerrec.coop

Appliance Rebate Application

For Office Use Only

Total Rebate	
Amount:	

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- ALL INFORMATION MUST BE COMPLETED TO RECEIVE REBATE
- Complete this form along with the specific product rebate form

Member	Information
Member Name	Address
City - State - Zip	Account Number
Phone (include area code: sample - 999-999-9999)	Email
Rebate Unit Inst	allation Information
Please answer questions based on t	he location where the unit was installed.
Location Installed	Structure Type
Same as above Other (complete below) Address City - State - Zip	Single Family Residence Farm Outbuilding Business Multi-Family Unit: apt/condo/duplex/etc.
Install Date	Rebate Unit Installed In New Construction Existing Structure Ownership
	Owned Leased
Installer (if applical	ble) or Purchased From
Business Name	Contact Name
City - State - 7in	Phone



Energy Star Appliance Rebate

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Program Criteria

Make

Model

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Total Rebate	
Amount:	

 ALL INFORMATION MUST BE COMPLETED TO RECEIVE REBATE All appliances must be ENERGY STAR rated. Limit of \$250 per account/year in total appliance rebates (find ratings at energystar.gov or on the yellow packaging label) 			
Account Number			
Dishwasher (Rebate \$25 per unit)			
Make			
Model			
Serial Number			

Serial Number

Water Heater Type

Refrigerator (Rebate \$25 per unit)*

Make
Natural gas/propane

Dryer Type
Electric
Gas

Make

Model

DATED COPY OF ITEMIZED SALES RECEIPT AND ENERGY STAR DOCUMENTATION MUST BE INCLUDED. Rebates \$200 or less will be applied as bill credits. Member certifies that the item listed in this application has been installed at the member's location served by REC. REC reserves the right to inspect home/equipment and verify this information before issuing a rebate. REC reserves the right to modify (including incentive levels) or terminate this program at any time without prior or further notice.

Member Signature	Date