



Butler County REC

Your Touchstone Energy® Cooperative



Mail to: PO Box 98 - Allison, IA 50602

For more information: 319-267-2726 or 888-267-2726

www.butlerrec.coop

Geothermal and Air Source Heat Pump Check-Up Rebate

For Office Use Only

Total Rebate

Amount:

Program Criteria

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

NOTE: Members with solar arrays or wind turbines are not eligible for rebates from Butler County REC.

Member Information

Member Name

Address

City - State - Zip

Account Number

Phone (include area code: sample - 999-999-9999)

Email

Rebate Unit Installation Information

Please answer questions based on the location where the unit was installed.

Location Installed

☐

Same as above

☐

Other

(complete below)

Address

City - State - Zip

Install (Service) Date

Structure Type

☐

Single Family Residence

☐

Farm Outbuilding

☐

Business

☐

Multi-Family Unit: apt/condo/duplex/etc.

Rebate Unit Installed In

☐

New Construction

☐

Existing Structure

Ownership

☐

Owned

☐

Leased

Installer (if applicable) or Purchased From

Business Name

Contact Name

City - State - Zip

Phone



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- This rebate can be submitted every three years.
- Contractor must complete and sign the rebate checklist for the type of system checked.
- By signing below, the contractor certifies that the items on the checklist were examined and adjusted as required to provide optimal system performance.

Member or
Business Name

Account
Number

1. Existing Heat Pump Unit Type

- ☐ Geothermal with electric resistance backup \$50/unit
- ☐ Geothermal with gas backup\$ 50/unit
- ☐ Air source with electric resistance backup \$50/unit
- ☐ Air source with gas back-up \$50/unit
- ☐ Mini split or hotel type ductless air source \$50/unit

2. Heat Pump Unit Specifications

Make

Model

Serial No.

Auxiliary Resistance (kW)

3. Geothermal System Type

- ☐ Open ☐ Closed loop

4. Gas Back-Up

Switchover Temperature (°F)

5. Check List Sheet Used by Contractor

- ☐ Contractor Checklist (Attach Completed List) ☐ REC Checklist (Attach Completed List)

7. Water Heater Type

- ☐ Electric ☐ Natural gas/propane

Contractor Signature

Date

DATED COPY OF ITEMIZED SALES RECEIPT MUST BE INCLUDED. Member certifies that the service in this application has been performed 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