Residential HVAC Tune-up

**Rebate Application** 

Have you ever wished you'd known something was going to break down before it did? If you had known you might have been able to prevent it from happening. Getting your HVAC equipment tuned up each year not only ensures your equipment



is running efficiently and saving you money on your electric bill, but could potentially catch any problems before they become more expensive problems.

Your local electric cooperative is offering residential member-consumers the opportunity to apply for a HVAC tune-up service incentive valued at 50% off the tune-up cost up to \$50.00. This incentive program is designed for heat pump technologies and central air conditioning systems. Gas furnaces are not eligible unless part of the central air system.



## To Qualify:

- One rebate per member account per calendar year.
- HVAC unit must be located in a home served by Southeastern Indiana REMC.
- · Unit must be 3 or more years old.
- The tune-up must be performed by a licensed HVAC contractor and include detailed description of service performed on receipt/invoice.
- Application must be filled out and signed by member.
- Submission for rebates must be within 90 days of tune-up service in the same calendar year.
- Rebate participation is subject to funding availability

Member Information					
*Name		*Account #			
*Phone		*Meter #			
	Cellphone Home				
Mailing Address		City		State	ZIP
*Email address					
*Home Type:	*Occupancy Status:			Tune-up Service Cost:	
Stick-built/Modular Mobile/Manufactured	Owner Rente	er/Tenant Landlord (	Vacation ren	tal	
*Required Field					



Equipment Info			
*Cooling Type:  Air conditioner Air source he *Outdoor Unit Brand:	at pump Mini-split heat pump *Outdoor Unit Model#	Geothermal heat pump ‡.	AHRI Reference#.
SEER/SEER2 rating:	* Do you have a maintenance cor	ntract? i-year contract	
*How did you hear about the in  Newsletter Social media	centive?  Co-op website WhyElectrify website	Bill stuffer Word of mo	outh Other:
	was performed by the heating a the programs rules and condition		nal shown below at the residence listed
Contractor Information			
*Name		* Company	
* Company Phone #		* Email address	
	sected fins Checked refrigerant charge ected entire system Tested all controls	Lubricated fan motors, if  Discussed proper syster	OEM recommended Checked belts, if applicable n operation with customer
*Required Field Member Signature:		Date:	
OFFICE USE ONLY:			
Date Approved:	Enrollment #: Meter #:		\$: