

Electric Heating Equipment Rebate Application

Customer Information

Account Name		Account Number	Location Number	Phone Number	
Mailing Address			City	State	ZIP Code
Date of Installation	Installation Address		City	State	ZIP Code
Electric Heating System: <input type="checkbox"/> New Install <input type="checkbox"/> Additional Install <input type="checkbox"/> Replacement Install				Building Type: <input type="checkbox"/> Home <input type="checkbox"/> Business <input type="checkbox"/> Shop	
Off-peak Electric Heating System Type: <input type="checkbox"/> Dual Fuel Heat <input type="checkbox"/> Storage Heat				<input type="checkbox"/> Public Building <input type="checkbox"/> Other	

Contractor Information

Name of Installing Contractor (if applicable)		City	State	ZIP Code
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Electric Heating Equipment	Manufacturer	Model Number	Qty.	kW Installed	Incentive Per kW	Total
Baseboard Heater					\$20	
Boiler					\$20	
Brick Storage Electric Boiler					\$20	
Brick Storage Electric Furnace					\$20	
Brick Storage Room Unit					\$20	
Cove Heater					\$20	
Forced-Air Furnace					\$20	
Hanging Unit Heater					\$20	
Plenum Heater					\$20	
Radiant Underfloor Heat					\$20	
Slab Storage – Electric Boiler					\$20	
Slab Storage – Electric Cable					\$20	
Wall Unit Heater					\$20	
Ground-Source Heat Pump				tons(s)	\$200	
Other:					\$20	
Air-Source Heat Pump				ton(s)	\$100	
Totals						

Requirements:

- Electric heating system must be on off-peak with a qualified backup heating system.
- Electric heating must be the primary source designed to heat the building.
- Electric heat is individually metered under a special rate.
- Electric heat equipment must be hard wired (no plug-in loads eligible for rebate).
- Air-source heat pumps do not have to be part of an off-peak heating system to be eligible for this rebate.
- Air-source and ground-source heat pumps must meet the CIP requirements outlined in the electric heat program description.
- Rebate not to exceed \$600 for all eligible heating equipment rebates per off-peak electric heat meter.



Name of Cooperative or Municipal:

Form Completed By:

Date:

Minnkota Power Office Use Only:

Total Rebate Amount Paid _____ Approved by: _____ Date: _____