



# LIGHTING

## 2024 Energy Efficiency Incentive Form

### ELIGIBILITY CRITERIA

- » New equipment must be installed on cooperative's lines.
- » Incentive not to exceed the equipment cost.
- » Incentives are in place through December 31, 2024. Funds are limited so submit required documentation as soon as possible.
- » Required documentation must be submitted within 3 months of purchase date.
- » Additional eligibility criteria may apply. Program is subject to change or cancellation without notice. Contact cooperative for details.
- » **Required documentation** listed below must be submitted no later than 3 months after purchase date.
  - » This incentive form
  - » A copy of your receipt or invoice for each item with purchase price(s) circled
  - » For fixtures (non-residential only), include packaging or documentation showing number of lumens

**Submit required documentation to:** rebates@riverlandenergy.com or mail to P.O. Box 277, Arcadia, WI 54612

### MEMBER INFORMATION *(Please fill out entire section)*

Member Name:			Account:	
Address:			Phone:	
City:	State:	Zip:	E-mail: <i>*will only use to contact you regarding this rebate if necessary</i>	
Date:	Member Signature:			

Incentive for:  Residential  Farm  Commercial  Industrial  Institution/Government  Other:

### INCENTIVE INFORMATION:

*(Please fill in gray shaded boxes for requested incentives. Green shaded cells to be filled out by cooperative)*

Equipment	Incentive		Quantity	Total	
LED Bulb	\$0.50	Incentive request must be for 5 or more bulbs. Quantity less than 5 bulbs do not qualify.			
Occupancy Sensor	\$5	Does not include motion detector bulbs or fixtures			
LED Exit Sign	\$5				
LED Fixture	\$ .50 per 800 lumens in the fixture	<b>Enter information for LED Fixtures with same lumen output on each line below. Continue on back of form if needed.</b>			
		Number of lumens per fixture		Number of fixtures	
		Number of lumens per fixture		Number of fixtures	
		Number of lumens per fixture		Number of fixtures	
		Number of lumens per fixture		Number of fixtures	
		Number of lumens per fixture		Number of fixtures	

### OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved- Reason:	Total Incentive Issued:
Cooperative Representative:	Date: