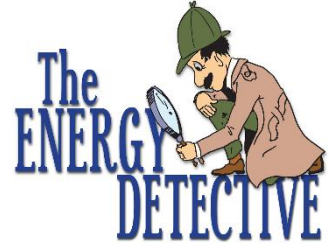


**ELIGIBILITY AND INSTRUCTIONS FOR COMPLETING THIS FORM** *(Please read)*

- ❖ Each incentive not to exceed cost of insulation and/or air-sealing improvements, up to \$500 plus a refund incentive for \$300 audit cost.
- ❖ Incentives will be issued in the form of a bill credit placed on the submitted member's account.
- ❖ Total Incentives cannot exceed \$800. See qualifications below:
  - **A home energy audit MUST be performed by JCE Co-op's Energy Detective prior to starting an insulation and/or air-sealing project.**
  - ✓ **Projects completed before completing an energy audit do not qualify.**
- When an insulation and/or air-sealing project is completed:
  - ✓ Member qualifies for an incentive of 100% of the audit cost up to \$300 for a paid audit.
  - ✓ Member qualifies for an incentive of 100% of insulation and/or air-sealing project costs up to \$500.
- ❖ **Installed insulation & air-sealing measures must be for an existing home receiving JCE Co-op electric and/or natural gas service.**
- ❖ Incentives are in place from **January 1, 2024**, through **December 26, 2024**, or until funds are depleted.
- ❖ Please allow 3-5 weeks for your incentive to be processed once proper documentation has been received.
- ❖ Jo-Carroll Energy reserves the right to inspect and verify equipment and installation.
- ❖ Incentive program limited to only **ONE** Incentive per member within a 5-year time period per home (location number).
- ❖ **Submit ALL documentation listed below no later than December 26, 2024,**  
*{however, members are encouraged to submit as soon as possible to ensure incentive}:*
  - ✓ This Incentive Form
  - ✓ A copy of your receipt(s) or invoice(s) for the project(s) **dated No Earlier than October 1<sup>st</sup>, 2023.** *(must include details of project measures taken)*



**Submit required documentation to: JCE Co-op • Attn: Member Services Department; Incentive Request • P.O. Box 390 • Elizabeth, IL 61028**

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

|   |       |           |   |                  |  |
|---|-------|-----------|---|------------------|--|
| Member Name   |       |           | Email   |                  |  |
|   |       |           | <i>I wish to receive digital communications with information about the cooperative, its programs and services.</i> <input type="checkbox"/> Opt Out |                  |  |
| Address   |       | Account # | Phone #   |                  |  |
| City  | State | Zip       | Date  | Member Signature |  |
| Incentive for: <input type="checkbox"/> Residential |       |           |   |                  |  |

**INCENTIVE INFORMATION** *(Please fill in shaded boxes for all items for which you are requesting an incentive)*

| Project<br><i>(for existing homes only)</i> | Specifications   | Project Cost | Incentive                            | Total:<br>Size x<br>Incentive |
|---|--|--------------|--------------------------------------|-------------------------------|
| <b>Home Energy Audit</b>                    | <i>Completed by a Jo-Carroll Energy representative</i> | \$ 300       | \$300                                | \$ 300                        |
| <b>Home Insulation &amp; Air-Sealing</b>    | <i>Detailed Project/Equipment Receipt Required</i>     | \$ _____     | 100% of project cost<br>(max. \$500) | \$ _____                      |

**Enter ALL of the following required information:**

|  |          |
|--|----------|
| <b>Contractor:</b>   |          |
| <b>Date of Energy Audit completed by the Energy Detective:</b> |          |
| <b>Project Completion Date:</b>                                |          |
| <b>Total Incentive Amount Requested:</b>                       | \$ _____ |
| <i>(\$800 maximum incentive possible)</i>                      |          |

**OFFICE USE ONLY**

|   |  |                 |  |                          |                      |
|---|--|-----------------|--|--------------------------|----------------------|
| <input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason: |  | Class:          |  | <b>Amount</b>            | <b>Code</b>          |
| Date of Purchase:   |  | Invoice Amount: |  | <b>Incentive issued:</b> | \$ _____<br>90 (JCE) |
| Member Services Representative:   |  | Date:           |  |                          | \$ _____<br>96 (JCE) |
| Billing Services Representative:  |  | Date:           |  |                          | \$ _____<br>95 (DPC) |