

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

- ❖ Incentive(s) not to exceed 50% of the cost of project.
 - ❖ Incentives will be issued in the form of a bill credit placed on the submitted member's account.
 - ❖ Equipment must be purchased and/or installed in 2024.
 - ❖ Installed equipment must be on cooperative's Natural Gas lines.
 - ❖ 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.
 - ❖ JCE Co-op reserves the right to inspect and verify equipment and installation.
 - ❖ All accounts are eligible for only **ONE** incentive per appliance/unit within a 5-year time period.
 - ❖ **Submit ALL documentation listed below no later than 3 months after purchase and installation and 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 or invoice** for each item purchased *(must include model #, size and efficiency specs.)*.
 - ✓ **AHRI Certificate Number**
- 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		
			<small>I wish to receive digital communications with information about the cooperative, its programs and services.</small>		
Address			Account	Phone	
				<small><input type="checkbox"/> Opt Out</small>	
City	State	Zip	Date	Member Signature	
Incentive for: <input type="checkbox"/> Residential <input type="checkbox"/> Farm <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institution/Government <input type="checkbox"/> Other:					

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

Equipment	Specifications	Check <input checked="" type="checkbox"/>	Incentive Total:
NEW Natural Gas Heating Unit			
Natural Gas Furnace / Boiler	AFUE ≥ 95% AHRI Certificate Number: _____	<input type="checkbox"/>	\$125
	<small>AFUE: _____ % Input BTU Rating: _____ Eae: _____ ECM: Yes or No</small>		

NEW Natural Gas Appliance Incentive

Natural Gas Water Heater	EF ≥ 0.67 <small>{Submit MODEL # and Documentation of (UEF) Uniform Energy Factor}</small> EF: _____	<input type="checkbox"/>	\$50
Natural Gas Appliances	<input type="checkbox"/> STOVE <input type="checkbox"/> CLOTHES DRYER <input type="checkbox"/> FIREPLACE INSERT <input type="checkbox"/> GENERATOR <input type="checkbox"/> OTHER _____		\$50 <small>per appliance</small>

Total Incentive Requested \$

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason:		Class:	Code: 97 (JCE)
Date of Purchase:		Invoice Amount:	
Member Services Representative:		Date:	\$
Billing Services Representative:		Date:	