

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 2026.**
- ❖ **Installed equipment must be on the Cooperative's Natural Gas lines.**
- ❖ **Incentives are in place from January 1, 2026, through December 22, 2026, 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 22, 2026, (however, members are encouraged to submit as soon as possible to ensure incentive):**

Do Not
Staple

- ✓ **This incentive Form.**
- ✓ **A copy of your receipt or invoice for each item purchased (must include model #, size and efficiency specs.).**
- ✓ **AHRI Certified Reference Number to verify efficiency of system. (Model #'s must match installed equip.)**

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 wish to receive digital communications with information about the cooperative, its programs and services. <input type="checkbox"/> Opt Out	
Address			Account #:	Phone
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 Certified Reference Number:		<input type="checkbox"/>	\$125 ea.
AFUE: _____ %	Input BTU Rating: _____	Eae: _____	ECM: Yes or No		

Provide AHRI #'s for ALL HVAC Equipment. (Model #'s must match installed equip.)

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

Total Incentive Requested \$

OFFICE USE ONLY

<input type="checkbox"/> Approved	<input type="checkbox"/> Not Approved - Reason:	DG System Connection: <input type="checkbox"/> Y or <input type="checkbox"/> N	Code: 86 (JCE)
Date of Purchase:		Invoice Amount:	
Member Services Representative:		Date:	Incentive Issued:
Billing Services Representative:		Date:	\$