

## **Independence Power & Light**

## Residential Electric Heat Pump Water Heater Rebate Application

Independence Power & Light offers rebates for new single-family or multi-family residential electric heat pump water heaters that are ENERGY STAR®\* qualified.

Rebate based on ENERGY STAR® qualifications.

\$300

Effective for equipment installed on or after September 1, 2010.

## **Rebate Requirements**

- Unit is installed in a single-family and multi-family residence, is used for domestic, no commercial, purposes and is the sole source of heated water to the home.
- Electric service to the residence is provided by Independence Power & Light.
- IPL must receive all information requested on the application form, including proof of purchase for the unit. The proof of purchase must list the brand, tank size, and model number of the unit.
- The rebate application form and proof of purchase must be submitted to IPL within one year of equipment installation.
- \* ENERGY STAR® specifications as of September 1, 2010.

## **Independence Power & Light**

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Phone: 816-325-7485

E-mail: IPLCustomerPrograms@indepmo.org

www.independencemo.org/pl

The rebate program is subject to change without notice. Rebates are subject to the availability of funding.

Applicant Information		
********ALL Rebates will be cre	edited to the utility account listed unles	s otherwise requested.********
Name:		
	pment is installed):	
City:	State:	Zip:
Daytime Phone:	Evening Phone:	
E-mail:		
Mailing address, if different from	n above:	
City:	State:	Zip:
Inspections are performed by IPL s To find ENERGY STAR® qualif	ied heat pump water heaters, visit ww	w.EnergyStar.gov
Equipn	nent Information – Heat Pump Wate	r Heater
You r	may wish to have your contractor fill out this se	ection.
Manufacturer:	Model Number	:
Installation Date:		
	dealer/contractor to provide Independenthat verify the information stated in this	
Applicant Signature:	D	ate:
F	or IPL Office Use Only	

Rebate Amount \$\_\_\_\_

Check Issue Date: \_\_\_\_\_

Authorization:

ENERGY STAR® Qualified:

Site Visit Date: \_\_\_\_\_

Inspector:

