

WATER HEATERS

2026 Energy Efficiency Incentive Form

This institution is an equal opportunity provider.

ELIGIBILITY CRITERIA

- ❖ New equipment must be installed on cooperative's lines.
- ❖ Incentive not to exceed the equipment cost.
- ❖ Incentives are in place through **December 21, 2026**. Funds are limited so submit required documentation as soon as possible.
- ❖ **Required documentation must be submitted within 3 months of install 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 install date.
 - ✓ This incentive form
 - ✓ A copy of your receipt or invoice for each item with purchase price(s) circled
 - ✓ Documentation showing the equipment has been installed

Submit required documentation to: *Oakdale Electric Cooperative / PO Box 40 Oakdale, WI 54649-0040*

MEMBER INFORMATION *(Please fill out entire section)*

Member Name			Email <i>*Email addresses will be used for cooperative communication only.</i>		
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 gray shaded boxes for requested incentives)*

Equipment	Specifications	Size <i>Enter gallons</i>	Quantity	Incentive	Total <i>Quantity x Incentive</i>
50-79 gallons	Must be on load management program for off-peak control. A \$3.00 credit will be automatically applied to your monthly bill.			\$150/unit	
80 gallons and larger	Must be on load management program for off-peak control. A \$3.00 credit will be automatically applied to your monthly bill.			\$500/unit	
Heat Pump Water Heater – 50 gallons or larger	Integrated (all-in-one) units Uniform Energy Factor ≥ 2.20 Load control not required.			\$500/unit	
Total Incentive Amount Requested:					

OFFICE USE ONLY

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