

2020 ILPGA Commercial Lawn Mower Program Application



1. **A copy of the Completed Application (One Mower Per Application)**
2. **A copy of the sales receipt or paid invoice to show proof of purchase of mower (Invoice MUST show Make of Mower and Model Number.)**

ALL REQUIRED INFORMATION to qualify for this program MUST be provided.

The application must be received, within 30 days or the application will be void. *(Applications are only valid for 60 days.)*

Email to krichardson@ilpga.org or Fax to: 217-529-8482

Or Mail to: Illinois Propane Gas Association, 5240 S. Sixth Street Road, Springfield, Illinois 62703-5128

**3 - \$1,000.00 OEM / New rebates per application or Actual cost up to \$750.00 for conversions
(Max of \$3,000 per company per year)**

Applicant Information

Applicant Name: _____

Mailing Address: _____

City: _____ State: _____ Zip: _____ Phone _____

I understand that this rebate is available only to applicants based in Illinois, that it is not a government program, and that the program may end at any time. I understand the Illinois Propane Gas Association assumes no responsibility whatsoever for the mower and, by providing incentive funding, makes no representation, warranty or guarantee regarding the qualifying mower. IPGA disclaims any liability for any personal injury, property damage, business losses, or any other damages of any other nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly arising from the use of the mower.

***** By signing this application, I acknowledge I have received and read the Rules of this program set forth by the IPGA*****

▶ Applicant Signature: _____ Date _____

Lawn Mower Sales Company Information

Lawn Mower Sales Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone _____

Commercial Mower Information

New _____ Converted _____

Year _____ Make _____ Model _____

Mower ID Number _____ Serial Number _____

Conversion Kit used _____ Serial Number _____

I understand and agree to all rules and conditions for participation in the program. I hereby declare that I am authorized to sign this application and that the information stated herein is accurate.

▶ Lawn Mower Sales Representative Signature: _____ Date _____

Propane Marketer Information

Propane Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____ Phone: _____

I understand and agree to all rules and conditions for participation in the program. I hereby declare that I am authorized to sign this application and that the information stated herein is accurate.

▶ Propane Company Representative: _____ Date _____

This program will only be offered as long as funds are available: the IPGA reserves the right to suspend the program at any time it determines funds are being exhausted.