

ILPGA 2020 WATER HEATER REBATE PROGRAM APPLICATION

Customers may not submit this form directly

Only propane marketers approved by the Illinois Propane Gas Association (ILPGA) may submit this application within 30 days after the safety inspection. Please complete the Dealer Participation Agreement (DPA) Form and email to krichardson@ilpga.org

The safety inspection must be completed by the propane marketer.

To apply for this rebate, type or print all required information, obtain the customer's signature and include all required documentation (invoice or receipt) dated not more than 6 months prior to the safety inspection date.

Exception: New Construction receipt or invoice dated not more than 12 months prior to the safety inspection date.

Scan and Email the original copy to krichardson@ilpga.org within 30 days of the safety inspection. Provide one copy to the customer and retain original copy for your records. Double-check your application for completeness; errors may delay or disqualify the application.

Submit the following with your application:

(failure to submit any and / or all of the following will disqualify application)

_____ Completed Application (make sure the customer signs it)

_____ Copy of paid invoice for appliance purchased *(or signed work order noting the appliance make, model & serial number)*

_____ Manufactured Home will require a copy of the "Spec" sheet and paid invoice showing the propane appliance(s)

_____ The HVAC / Plumbers license number or Tax ID is required and must be on the application. If it is not on the application the application will be disqualified.

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_____ \$300 Tankless _____ \$300 Power Vent Water Heater _____ \$200 Standard Water Heater

PROPANE APPLIANCE INFORMATION: _____NEW _____REPLACEMENT

___ New Construction ___ Manufactured Home ___ Electric Replacement ___ Fuel Oil Replacement

___ Natural Gas Replacement ___ Wood Burner Replacement

___ Geothermal Replacement ___ Coal Burner Replacement ___ Propane to Propane

Brand: _____ Serial #: _____ Install Date: _____

APPLICANT INFORMATION *(This is where the check will be mailed to)*

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Installation address if different from above: _____

HVAC INCENTIVE INFORMATION (Except for Propane to Propane replacement)

_____ \$300 Tankless or Power Vent Water Heater _____ \$200 Standard Water Heater

HVAC Company: _____

Installers Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Plumbers License, FEIN or Tax ID Number: (required) _____

PROPANE COMPANY INFORMATION

Company: _____ Phone: _____

Safety Inspector's Name: (PLEASE PRINT) _____

Address: _____

City: _____ State: _____ Zip: _____

I hereby agree not to modify the equipment for a period of five years from the date of installation in a way that would materially impair the equipment's performance with respect to energy conservation, efficiency or air quality.

I consent to on-site examination of the above installation by an employee, inspector or agent for ILPGA for the purpose of verifying compliance of the installation with program and safety rules. I have received a copy of the program rules and understand that this rebate is available only through authorized propane dealers in Illinois, that this is not a government program and that the program may end at any time.

Applicant Signature: _____ Date: _____