

Kay Electric Geothermal Rebate Application

| Memb | er Name: | | Account #: | | | | |
|-----------------------------------|---|---------------------------------------|--|---------------------------|--|--|--|
| Phone | :Ema | ail: | | | | | |
| Addres | ss: | City: | State: | Zip: | | | |
| | (Physical address where appliance we | as installed) | | | | | |
| Section A: New Home Installation? | | | | | | | |
| Is this | s a new home installation? | ? YES / NO | If " YES "; please proceed | lto Soction C | | | |
| | | TES / NO | If " NO "; please proceed | | | | |
| Sect | ion B: Previous Heati | ng & Cooling F | Equipment Informa | ıtion | | | |
| Reaso | on for replacing existing h | eating and air-con | ditioning equipment: | | | | |
| | Retrofit (old unit/equipment s | · · · · · · · · · · · · · · · · · · · | | | | | |
| | Please provide reason for replacing the existing unit: | | | | | | |
| Ш | ☐ Replacement (equipment has failed) Please provide reason for replacing the existing unit: | | | | | | |
| | | | | | | | |
| What | type of heating system di | d the home previo | ously have? | | | | |
| | Gas-Forced Air | | | | | | |
| | Electric Resistance-Forced Air | CCD. | | | | | |
| | | CEED | | | | | |
| | Electric Heat Pump: | HSPF | | | | | |
| | Wood | 1131 1 | | | | | |
| | Other (Please specify): | | | | | | |
| | "Year" | Date (If SEER or EER are not | available; please provide date of instal | llation of existing unit) | | | |
| What | type of cooling system die | d the home previo | uisly have? | | | | |
| | | SEER, BTU | 5 | | | | |
| | | EER, How | | | | | |
| | | SEER, BTU | | | | | |
| | Ground Source Heat Pump: | EER, BTU | | | | | |
| | Other (Please specify): | | | | | | |
| | "Year" | Date (If SEER or EER are not | available; please provide date of instal | llation of existing unit) | | | |
| Existi | ing Water Heater(s): | | | | | | |
| Numbe | er of Water Heaters | | | | | | |
| | | e(s) in gallons | | | | | |
| | Electric | | | | | | |
| | Propane or Natural Gas | | | | | | |
| | Tankless/Demand Electric Tankless/Demand Gas | | | | | | |
| | Tankiess/Demand Gas | | | | | | |

Please attach and submit all pertinent supplementary information with this application including receipts, technical specifications, etc.

Section C: New Heat Pump Equipment Information

| Serial # | Attach the following REQUIRED material: | | | | | |
|--|---|--|--|--|--|--|
| Model | Copy of check or credit to consumer | | | | | |
| Capacity in BTU/Tons | • • | | | | | |
| Size of Loop | Copy of invoice from contractorCopy of Manual J | | | | | |
| Type of Loop: | , copy of intallical s | | | | | |
| □ Closed □ Lake | Current Courses Heat Burner Minimum/or | | | | | |
| ☐ Vertical | Ground Source Heat Pump Minimum's: Ground Source Heat Pump 2 nd Stage EER Minimum's | | | | | |
| ☐ Horizontal | > Closed or Open Loop: > or 15.9 EER & > 3.3 | | | | | |
| Type of system: | COP- (Desuperheater not required) ➤ Split System -> 15.5 EER & ≥ 3.3 COP | | | | | |
| □ Package | | | | | | |
| □ Split | | | | | | |
| First Stage Operation EER (Part Load) | COP (1st stage) | | | | | |
| Second Stage Operation EER (Full Load) (if applicable) (2nd Stage) | | | | | | |
| Total Cost of Installation: \$ | | | | | | |
| Installation Date of the Heat Pump(s): | | | | | | |
| What type of back-up/supplemental) h | eating system will the new heat pump use? | | | | | |
| □ Propane | | | | | | |
| □ Natural Gas□ Electric (kW) | | | | | | |
| ☐ Other (Please specify) | | | | | | |
| New Water Heater(s): | | | | | | |
| Desuperheater installed? YES / NO | Additional Desuperheater Funds | | | | | |
| | \$150 (with 2/1 co-op match of \$75= \$225) to be given with | | | | | |
| Was the existing water heater replaced? | units installing a desuperheater. | | | | | |
| YES / NO | (If "yes"; please provide new information below) | | | | | |
| | Number of Water Heaters | | | | | |
| | Size(s) in gallons □ Electric | | | | | |
| | □ Propane | | | | | |
| | ☐ Natural Gas | | | | | |
| | ☐ Tankless/Demand Electric | | | | | |
| | ☐ Tankless/Demand Gas | | | | | |

Section D: Summary and Signatures

Member Signature:

| I certify that all information within this application is correct, and the listed address corresponding to my customer acc | | | |
|---|-----------------|---|--|
| Member's Signature: | | Date: | |
| Retailer/Contractor Information and Signature: | | | |
| HVAC Contractor Name: | | | |
| Contact Person: | | Phone: | |
| Address: City: | Sta | ate: Zip: | |
| size, and HVAC system information. I recognize that Kay Ele information that I have provid Contractor's Signature: Summary and Kay Electric Representative Signature | ded. | , | |
| | | int to be awarded to consumer) | |
| □ Ground Source Heat Pump □ Desuperheater (additional \$225 rebate on units installed with desuperhe □ GSHP to GSHP | \$ eater) \$ | Rebate/ton Unit Size in ton Desuperheater | |
| | \$ | Total Rebate | |
| "I certify that all information within this application is correct, an the listed address corresponding to the member's custome | • | • | |
| | Date Ins | spected: | |
| Kay Electric Representative Signature: | | Date: | |