

Submit by mail or in person: 2099 Hwy 3 or PO Box 353 Clarion, IA 50525 For more information: 515-532-2805 or 800-728-0013 www.prairieenergy.coop

40+ Watt Outdoor Lighting Rebate

	or Office U	se Only	
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Total Rebate	
Amount:	
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Program Criteria	
- ALL INFORMATION MUST BE COMPLETED TO R	RECEIVE REBATE
- Must be installed/used at member's home or farm	
· · · · · · · · · · · · · · · · · · ·	ation must be submitted within 6 months of purchase
- Rebate is 50% cost of bulb or fixture up to \$15	
	<u> </u>
Member or Business Name	Account Number
Dusiness Name	
ED Outdoor Lights	
Number Installed (40 Lyests)	
Number Installed (40+watts)	
Total Cost (40+watts)	
DATED COPY OF ITEMIZED SALES RECEIPT MUST BE IN	ICLUDED. Member certifies that the item listed in this application has
been installed at the member's location served by REC. REC	C reserves the right to inspect home/equipment and verify this
information before issuing a rebate. REC reserves the right	to modify (including incentive levels) or terminate this program at any

time without prior or further notice.

Member Signature	Date



Rebate Application

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For Office Use Only

Total Rebate	
Amount:	

Program Criteria

- ALL INFORMATION MUST BE COMPLETED TO RECEIVE REBATE
- Complete this form along with the specific product rebate form
- Rebate application along with required documentation must be submitted within 6 months of purchase

Member	Information
Member Name	Address
City - State - Zip	Account Number
Phone (include area code: sample - 999-999-9999)	Email
Rebate Unit Inst	allation Information
Please answer questions based on the	he location where the unit was installed.
Location Installed	Structure Type
Same as above Other	Single Family Residence
(complete below)	7 Farm Outbuilding
Address	Business
City - State - Zip	Multi-Family Unit: apt/condo/duplex/etc.
	Rebate Unit Installed In
Install Date	New Construction Existing Structure
	 Ownership
	Owned Leased
Installer (if applical	ole) or Purchased From
Business Name	Contact Name
City - State - Zip	Phone