

Instructions for Use

Step 1

Determine Eligibility

Verify that the utility company listed on the incentive application is your electric utility service provider. Incentives are offered to members with electric service in Michigan only. Applications for other participating utility service providers can be found at michigan-energy.org.

Step 2

Product Installation and Receipts

For products installed by the homeowner, save all receipts for all products for which you plan to request an incentive.

For products installed by a contractor, save the paid receipt/invoice provided by the contractor.

Receipts or invoices must clearly indicate the equipment type, make, model, price and date of purchase, or installation.

Step 3

Complete and Submit Your Incentive Application

This version of the form is in effect for qualified items purchased between January 1, 2020 and December 31, 2020. Be sure you fill out the application completely. Completed documentation needs to be received within 60 days of purchase by December 31, 2020, whichever is earlier. For the full program Terms and Conditions, refer to Page 5 of the application.

Requirements for Incentive Processing:

- Completed/signed copy of this form.
- Copy of sales receipt/invoice indicating:
 - ✓ Equipment type
 - ✓ Price
 - ✓ Marked paid in full
 - ✓ Manufacturer and model number
 - ✓ Date of purchase/installation

Submit your completed application and required paperwork to:

Mail: MECA EO Programs, 431 Charmany Drive, Madison, WI 53719

Email: info@michigan-energy.org

Fax: 608.646.7682

Step 4

Payment

Once completed paperwork is submitted, incentive payments are usually mailed within six to eight weeks.

**Thank you for participating in
the Energy Optimization program.**



2020 Residential ENERGY STAR[®] Incentive Application



This application is for qualified items purchased and installed between January 1, 2020 and December 31, 2020. Completed applications must be received within 60 days of purchase.

SECTION 1: Member Information

Member Name (as it appears on electric bill):		Cell Phone:	Home Phone:	Email:	
Installation Address (where equipment is installed):		City:		State: MI	ZIP:
Mailing Address (if different than above):		City:		State:	ZIP:
Preferred method of follow-up communication: <input type="checkbox"/> Postal mail <input type="checkbox"/> Email <input type="checkbox"/> Home phone <input type="checkbox"/> Cell phone					
Electric Utility Account Number (found on monthly bill):		Property Type (check all that apply): <input type="checkbox"/> Single-Family <input type="checkbox"/> Condo <input type="checkbox"/> Townhouse <input type="checkbox"/> Other		Rental Property: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Does home have central AC? <input type="checkbox"/> Yes <input type="checkbox"/> No	Water heating fuel type: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> Other _____				
Primary fuel for home heating (check one): <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> Other _____			Check one: <input type="checkbox"/> Existing home <input type="checkbox"/> New construction		

SECTION 2: Incentive Payment Information

Section A Make Incentive Check Payable to: <input type="checkbox"/> Member <input type="checkbox"/> Landlord					
Section B Complete section below only if incentive will be paid to the Contractor or Landlord					
Payee Name (as shown on income tax return):		Payee Business Name (if different than payee name):			
Payee Email:		Payee Home Phone:		Payee Cell Phone:	
Payee Address:		City:		State:	ZIP:
Mail Check to: <input type="checkbox"/> Payee Address <input type="checkbox"/> Installation Address <input type="checkbox"/> Alternate Address (complete below):					
Alternate Pay Address (optional):		City:		State:	ZIP:
Payee Federal Tax Classification (check ONE only): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor/Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other tax exempt organization or government agency					
Payee Taxpayer Identification Number (TIN) (must match payee legal name above): FEIN #: _____ - _____ OR SSN: _____ - _____ - _____					
Certification: the following certifications are required in order for this form to substitute for the IRS form W-9. Under penalties of perjury, I certify that: 1. The payee's TIN is correct. 2. The payee is not subject to backup withholding due to failure to report interest and dividend income. 3. The payee is a U.S. citizen. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.					
Payee Signature: /S/		Print Name:		Title:	Date:

Signature

The Residential ENERGY STAR Incentive Application cannot be processed unless all of the appropriate fields on this application are complete. This application is valid for products installed between January 1, 2020 and December 31, 2020. I have read and understand the Terms and Conditions. I certify the information I have provided is true and correct, and the product(s) for which I am requesting an incentive meets the requirements in this application. I have elected to utilize electronic signatures. I understand and intend that a legal signature is formed by typing my name on this document. If any of the parties do not wish to sign this document electronically, all must opt out together and print a paper copy to sign manually.	
Member Signature: /S/	Print Name:

Submit your completed application to: MECA EO Programs, 431 Charmany Drive, Madison, WI 53719 Email: info@michigan-energy.org Fax: 608.646.7682



2020 Residential ENERGY STAR® Incentive Application



SECTION 3: Electric Measures

Products must be new and in working condition. Refurbished products are not eligible for incentives.

Eligible Items	Program Qualifications	Date Installed	Incentive Amount	Quantity	Total Incentive*
LED Exterior Fixture	ENERGY STAR® qualified. Limit 12 per install address. <input type="checkbox"/> 1-bulb fixture <input type="checkbox"/> 2-or more bulb fixtures Manufacturer: _____ Model #: _____		\$5		\$
Ceiling Fan	Must include ENERGY STAR LED light kit. Limit 12 per install address. Manufacturer: _____ Model #: _____		\$10		\$
Advanced Power Strip - Tier 1	Power strip must include at least one uncontrolled socket to which a primary device is connected. Limit 2 per install address. Manufacturer: _____ Model #: _____		\$5		\$
Occupancy Sensor - (for Lighting Control)	Limit 6 per install address. Manufacturer: _____ Model #: _____		\$5		\$
Dehumidifier	ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____		\$15		\$
Room Air Conditioner	ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____		\$10		\$
Room Air Purifier	ENERGY STAR qualified. Limit 1 per install address. Manufacturer: _____ Model #: _____		\$10		\$
Refrigerator	ENERGY STAR qualified. Limit 1 per install address. Compact fridge excluded. <input type="checkbox"/> Side by Side <input type="checkbox"/> Top Freezer <input type="checkbox"/> Bottom Freezer <input type="checkbox"/> Single Door Manufacturer: _____ Model #: _____		\$20		\$
Chest Freezer or Upright Freezer	ENERGY STAR qualified. Limit 1 per install address. Manufacturer: _____ Model #: _____		\$15		\$
TV	21"-50". ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____ Serial #: _____ Screen Size (inches): _____		\$10		\$
TV	51"+. ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____ Serial #: _____ Screen Size (inches): _____		\$20		\$

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2020 Residential ENERGY STAR[®] Incentive Application



Eligible Items	Program Qualifications	Date Installed	Incentive Amount	Quantity	Total Incentive*
Personal Computer	ENERGY STAR qualified. Laptop not included. Limit 2 per install address. Manufacturer: _____ Model #: _____		\$10		\$
Wi-Fi Enabled Thermostat	Must feature Wi-Fi connectivity and maintain a 7 day, programmable schedule. Limit 1 per system. Thermostat must control an HVAC system that includes cooling and/or electric heat. Manufacturer: _____ Model #: _____		\$75		\$
Clothes Washer	ENERGY STAR qualified. Limit 1 per install address. Dryer Type: <input type="checkbox"/> Electric <input type="checkbox"/> Gas Manufacturer: _____ Model #: _____		\$20		\$
Clothes Dryer	Must be electric. Must have a moisture sensor or be ENERGY STAR qualified.** Limit 1 per install address. Manufacturer: _____ Model #: _____		\$20		\$
* Incentive cannot exceed purchase price. ** Auto-dry not eligible.			TOTAL REQUESTED:		\$

SECTION 4: Requirements for Incentive Processing

- Completed and signed copy of this form.
- Copy of recent utility bill.
- Copy of sales receipt/invoice indicating:
 - ✓ Equipment type
 - ✓ Price
 - ✓ Manufacturer and model number
 - ✓ Date of purchase/installation
 - ✓ Marked paid in full

INCOMPLETE APPLICATIONS CANNOT BE PROCESSED FOR PAYMENT
NOTIFICATION OF PROBLEMS WITH INCOMPLETE APPLICATIONS WILL BE SENT VIA EMAIL OR U.S. MAIL.
APPLICANTS WILL BE GIVEN 30 CALENDAR DAYS TO RESPOND BEFORE APPLICATION IS DEEMED INELIGIBLE.
APPLICATIONS MUST BE RECEIVED WITHIN 60 DAYS OF PURCHASE AND/OR INSTALLATION OF MEASURES.

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2020 Residential ENERGY STAR® Incentive Application



Terms and Conditions

APPLICATION: This application and any required additional documentation, including the invoice, must be filled out completely, truthfully, and accurately. Members are advised to retain a copy of this application and any accompanying documentation submitted to HomeWorks Tri-County Electric Cooperative under this program. HomeWorks Tri-County Electric Cooperative and its contractors will not be responsible for lost documentation pertaining to this application request. Details of this program, including incentive levels, are subject to change or cancellation without prior notice. This application with required documentation must be received within 60 days of the installation's completion. Please visit michigan-energy.org for the most up-to-date details.

LIMITED FUNDS: Funds for incentives are limited and available on a first-come, first-served basis. Incentive amounts are valid through December 31, 2020, unless revised. HomeWorks Tri-County Electric Cooperative reserves the right to not pay this incentive if funds are not available at the time of application approval, or if the form is not filled out completely and accurately, including all required additional information, and submitted within the required time allowed. Incentive amount may not exceed purchase price.

ELIGIBILITY: This offer is valid for HomeWorks Tri-County Electric Cooperative residential members applying through the Energy Optimization Residential ENERGY STAR program only. Members applying for an incentive must receive electricity distribution service from HomeWorks Tri-County Electric Cooperative. This offer is not valid for commercial properties. Equipment must be installed in the HomeWorks Tri-County Electric Cooperative service territory. Eligible equipment can be found on Pages 3 and 4 of this application. Incentives are limited per eligible measure/unit as listed on Pages 3 and 4.

APPROVAL, VERIFICATION, AND INSPECTION: Prior to any payment of incentives, HomeWorks Tri-County Electric Cooperative reserves the right to verify sales transactions. Members and/or their contractor will verify that the installed energy saving measures meet all applicable building codes, zoning laws, local, state, and federal requirements, and other relevant requirements. The member/contractor is responsible for any applicable permits as required by aforementioned code/law. Outdoor temperatures may affect this verification process. The member's home may also be selected for a quality control post-installation inspection by HomeWorks Tri-County Electric Cooperative. No warranty is implied by this inspection.

PROOF OF PURCHASE: A receipt itemizing the purchased equipment must accompany each Energy Optimization ENERGY STAR Incentive Application Form. The receipt must indicate the equipment type, make, model, price, and the date of purchase.

PAYMENT: Once completed paperwork is submitted, incentive payments are mailed within six to eight weeks. Payment processing may take longer if information is missing on the application. Please contact the Energy Optimization program if you have any questions about your incentive.

TAX LIABILITY: HomeWorks Tri-County Electric Cooperative will not be responsible for any tax liability that may be imposed on the member as a result of the payment of incentives. Please contact your tax advisor for more information.

NO ENDORSEMENT: HomeWorks Tri-County Electric Cooperative does not endorse any particular manufacturer, product, system design, claim, or contractor in promoting this program.

INFORMATION RELEASE: The member agrees that HomeWorks Tri-County Electric Cooperative may include their name, address, account number, services, and resulting energy savings ("Information") in a database hosted by a contractor of HomeWorks Tri-County Electric Cooperative, and such Information may be included in reports or other documentation submitted to HomeWorks Tri-County Electric Cooperative, and/or the Michigan Public Service Commission ("Reports"). HomeWorks Tri-County Electric Cooperative will treat such Information as confidential and the Information in the Reports shall only be in the aggregate.

RELEASE/INDEMNIFICATION: Payment of incentives under the Energy Optimization Program and/or evaluation of applications for incentives shall not deem HomeWorks Tri-County Electric Cooperative or any of its affiliates, employees, or agents ("Electric Cooperative Parties") to be responsible for any work completed in connection herewith. The applicant fully releases the Electric Cooperative Parties from any and all claims it may have against the Electric Cooperative Parties in connection with this application, the incentives, or the work performed in connection with them. In addition, the applicant agrees to defend, indemnify, and hold the Electric Cooperative Parties harmless from and against any and all claims, losses, demands, or lawsuits by any third parties arising in connection with this application, the payment or non-payment of incentives, or any work performed in connection with them.

DISCLAIMER: NEITHER HOMEWORKS TRI-COUNTY ELECTRIC COOPERATIVE NOR ANY OF ITS AFFILIATES GUARANTEES THE ENERGY SAVINGS OR MAKES ANY WARRANTIES ASSOCIATED WITH THE MEASURES ELIGIBLE FOR INCENTIVES UNDER THIS PROGRAM. HOMEWORKS TRI-COUNTY ELECTRIC COOPERATIVE HAS NO OBLIGATIONS REGARDING, AND DOES NOT ENDORSE OR GUARANTEE ANY CLAIMS, PROMISES, WORK, OR EQUIPMENT MADE, PERFORMED, OR FURNISHED BY ANY CONTRACTOR OR EQUIPMENT VENDOR THAT SELLS OR INSTALLS ANY ENERGY EFFICIENCY MEASURES. HOMEWORKS TRI-COUNTY ELECTRIC COOPERATIVE MAKES NO WARRANTIES OR REPRESENTATIONS OF ANY KIND, WHETHER STATUTORY, EXPRESS, OR IMPLIED, INCLUDING WITHOUT LIMITATIONS, WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE CENTRAL AIR CONDITIONING OR FURNACE EQUIPMENT PROVIDED BY A MANUFACTURER OR VENDOR. CONTACT YOUR CONTRACTOR FOR DETAILS REGARDING EQUIPMENT PERFORMANCE AND WARRANTIES. HOMEWORKS TRI-COUNTY ELECTRIC COOPERATIVE HAS NO OBLIGATION TO MAKE ANY INCENTIVE DESCRIBED HEREIN UNLESS CERTAIN MINIMUM REQUIREMENTS OF THE PROGRAM HAVE BEEN MET AND FUNDS ALLOCATED FOR SUCH INCENTIVES ARE AVAILABLE FOR DISTRIBUTION.

PROPERTY RIGHTS: The member represents that they have the right to complete and/or install the energy-saving measures on the property on which those measures are completed and/or installed, and that any necessary landlord's consent has been obtained.

MEMBER'S CERTIFICATION: The member certifies that they have purchased and installed the equipment listed in this application at the defined location. The member agrees that all information is true.

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