



Eastern Iowa Light and Power Cooperative  
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2025  
INCENTIVES

## Residential Electric Heat Rate

PLEASE complete ALL sections and sign form to ensure proper and prompt payment of rebate.

### Member Address Information (person receiving rebate)

Check if wind or solar generation is installed. ☐

First Name	Last Name	Account Number	Phone
Address	City	State	Zip
Email Address			

### Equipment Location Information

Check if same address as above: ☐

First Name	Last Name	Account Number	Phone
Address	City	State	Zip
Email Address			

Check the ACCOUNT TYPE where equipment is located

☐ Residence Only    ☐ Farm Only    ☐ Apartment Building/Unit

☐ Residence/Farm    ☐ Business Only

☐ Residence/Business    ☐ Commercial/Industrial

Check if you are a builder/developer and building is not yet owned by live-in residents: "Spec Building" ☐

### Installation and Equipment Information

YEAR HOUSE BUILT (approx.)

CONDITIONED AREA (sq. ft.)

INSTALLATION TYPE:

- ☐ New Resistance Heating Equipment with Heat Plus Rate
- ☐ Existing Resistance Equipment with Rate Change to Heat Plus
- ☐ Existing Air Source Heat Pump with Rate Change to Heat Plus
- ☐ Existing Geo Heat Pump with Rate Change to Heat Plus

DATE INSTALLED (of meter or heating equipment)

HEAT RATE ACCOUNT #

(if different than that shown for equipment location above)

#### RESISTANCE HEATING SYSTEMS ONLY:

SYSTEM TYPE:

- ☐ Baseboard Resistance    ☐ Electric Furnace    ☐ In-Floor w/Boiler
- ☐ Baseboard w/Boiler    ☐ Ceiling Cable    ☐ Other
- ☐ Cove Resistance    ☐ Floor Cable

KW INSTALLED

SECONDARY HEATING SYSTEM:

- ☐ None    ☐ Oil
- ☐ Natural Gas    ☐ Wood
- ☐ Liquid Propane Gas    ☐ Other

#### NEW RESISTANCE HEATING SYSTEMS ONLY:

TYPE OF SYSTEM REPLACED:

- ☐ New Construction    ☐ Natural Gas    ☐ Resistance
- ☐ Added Capacity    ☐ Oil    ☐ Other
- ☐ Liquid Propane Gas    ☐ Wood

AGE OF SYSTEM REPLACED? (yrs)

INSTALLER: ☐ Owner    ☐ Utility    ☐ Contractor

Business Name (retailer or installing contractor)

Address

City

State

Zip Code

REBATE (see below)

Please attach copy of sales invoice (for new heating equipment only).

**Incentive Rebate Amounts** - \$100 per residential home or \$50 per multi-family apartment/unit payable to owner of building.

### Member Agreement (Must Sign)

I verify that the above described equipment was installed on the date and location specified. I agree to all program requirements provided (either separately or on back of this form) and that my electric Cooperative reserves the right to inspect all equipment and verify information before issuing a rebate.

Member Signature

Date

Office Use Only:

Cooperative ID

Employee Name

Notes:

Authorized Amount

## Terms and Conditions - Electric Heating Equipment - Rate Incentive

**Program Offer:** The Program covers products purchased and/or services rendered on or after **January 1, 2025**.

This heating rate program applies to Members with approved electric space heating equipment. There is a guarantee of rate availability for at least three additional heating seasons. This guarantee, does not fix the magnitude of the rate offered.

### Program Requirements:

1. The primary heating system must be electric and metered separately.
  - The only other types of equipment that can be connected behind the Heat Plus meter are the ERV or HRV.
  - No water heaters or other equipment can be connected behind the Heat Plus meter.
2. The primary electric heating source must operate first, with the backup system operating only when the primary system is unable to satisfy the indoor thermostat setting.
3. An electric water heater (storage, heat pump water heater or supplemental solar) must be installed and provide 100% of the domestic water heating for the home.
4. The space heated by the primary electric system must be an area of 400 square feet or more.
5. The rebate for the Heat Plus Rate is only available to the building owner. The rate is applicable to all ratepayers (including renters) with eligible heating systems.

### Qualifying Heat Plus Facilities:

The following facilities can qualify for the Heat Plus rate:

- Single family residential dwellings and/or their outbuildings.
- Residential apartments and multi-family buildings (e.g. nursing homes and assisted living complexes). *May not apply to large complexes with individual meters.*
- Buildings or facilities that 1.) are served by one or more transformers with a combined rated capacity of 75 kVA or less, or 2.) maintain an actual combined peak of 75 kW or less.
- Separately metered building spaces that maintain an actual combined peak of 75 kW or less.

Note: The Heat Plus rate is not intended to be applied to periodic heating applications or to provide heating during peak winter conditions only. A system where the building is totally unheated during unoccupied times is unacceptable.

The Cooperative reserves the right to suspend the rate and remove any metering equipment owned by the Cooperative if the Member is no longer using the equipment on a regular basis or is in violation of any program requirement.

### General Terms and Conditions

Rebates shall be pro-rated based on the percent of power supplied by the Cooperative if the member has distributed generation.

**Application Information:** Missing or incorrect information on the application may delay processing and delivery of the rebate. An invoice is required and should include specific product information, including the brand, model, serial number and date of purchase of the energy efficient measures. Other information including manufacturer's equipment performance sheets may be required upon request.

The Cooperative reserves the right to verify sales transactions and to have reasonable access to the Member's facility to inspect pre-existing equipment (if applicable) and energy efficient measures installed under this program.

**Warranty Information:** The Cooperative makes no warranties, expressed or implied, with respect to equipment operation, material, workmanship or manufacturing. The Cooperative does not guarantee that a certain level of energy or cost savings will result from the use of products covered by this program.

**Limitation of Liability:** The Cooperative's liability in connection with this program is limited to paying the rebate specified when all terms and conditions have been satisfied. Under no circumstances shall the Cooperative be liable for any consequential or incidental damages or tax liability resulting from participation in this program.

**Participant Certification:** Participating Member certifies that he/she purchased and installed the equipment listed on their application at the defined location served by the Cooperative. The Member agrees that all information provided is true and that he/she has conformed to all program requirements. If the equipment and application does not comply with the Cooperative's rules and qualifications, the rebate amount may be denied or adjusted.

**Program Changes/Termination:** The Cooperative reserves the right to extend, modify (including incentive levels) or terminate this Program at any time without prior or further notice. The Member is responsible for checking with the Cooperative to determine whether the program has been changed or is still in effect.

**Members must apply for rebates within six (6) months of the purchase date (as shown on the Member's invoice) and are subject to the current year program offer if received after January 31st.** Past eligibility, however, does not guarantee that equipment will meet criteria for current programs in effect.