

LIGHTING2024 Energy Efficiency Rebate Form

Phone: 715-537-3171 or 800-322-1008 Fax: 715-637-1906 • barronelectric.com

ELIGIBILITY CRITERIA

- Rebate not to exceed 20% of the cost of individual items.
- Equipment must be purchased in 2024.
- Installed equipment must be on cooperative's lines.
- * Rebates are not allowed for a measure and a component of that measure. For example, if a LED fixture comes with a bulb, the fixture qualifies for a rebate but not the bulb.
- Rebates are in place through December 13, 2024, or until funds are depleted. Funds are limited so members are encouraged to submit as soon as possible.
- The incentive for qualifying rebates will appear as a bill credit unless the incentive is greater than \$200 in which case a check may be issued.
- All documentation listed below must be submitted no later than 3 months after purchase date, or by December 13, 2024, whichever date comes first.
 - ✓ This Rebate Form
 - Documentation showing number of lumens or number of bulbs per fixture if applicable
 - ✓ A copy of your receipt or invoice for each item purchased

Submit required documentation to: Barron Electric Cooperative, PO Box 40, Barron, WI 54812 Attn: Member Services

ACCOUNT INFORMATION (Please fill out entire section)											
Member Name	Email										
				Email addresses will be used for cooperative communication only.							
				Opting out now or in the future is always available. Opt out Now							
Address				Barron Electric Account #							
City S		State Zip		Date Mer			ember Signature	mber Signature			
								_			
Phone											
	Rebate for:	Residentia	☐Farm [Commercial Industrial In			stitution/Government				
			6								
INCENTIVE I	NFORMATIC	N: (Please	fill in any appl	cable inforn	nation)						
Equipment	Incentive						Quantity	Е	quipment Cost	Total Incentive	
LED Bulb	\$0.50		Incentive request must be for 5 or more bulbs.								
LED Fixture		Quantitie	Quantities less than 5 bulbs do not qualify. Enter information for LED five uses with same lumps output an each line below. Continue on back of form if								
	\$0.50 per 800 lumens		Enter information for LED fixtures with same lumen output on each line below. Continue on back of form if needed.								
		Number o	of Lumens	Number	of						
		per Fixtur	e:	Fixtures:							
		Number o		Number of							
		-	per Fixture:		Fixtures: Number of						
			Number of Lumens per Fixture:								
		Number		Fixtures: Number of							
			per Fixture:		Fixtures:						
		Number o	Number of Lumens		Number of						
			per Fixture:		Fixtures:						
			Number of Lumens		Number of						
Occupancy		per Fixtur	e:	Fixtures							
Sensor	\$5										
LED Exit Sign	\$5										
	OFFICE USE ONLY										
Approved Not Approved-Reason:								Total Incentive Issued: \$			
Cooperative Representative:								Date:			