



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

HOME PERFORMANCE ASSESSMENT ELECTRICAL USAGE AUDIT 2017 Energy Efficiency Rebate Form

ELIGIBILITY AND INSTRUCTIONS FOR COMPLETING THIS FORM *(Please read)*

Home Performance Assessments

- ❖ Members will receive up to a 50% discount on the cost of a Home Performance Assessment. Assessments are valued at \$300.
- ❖ BEC reserves the right to deny or limit any rebate/incentive.
- ❖ Assessment must be arranged by your cooperative or a cooperative approved partner.
- ❖ Building undergoing assessment must be on cooperative's lines.
- ❖ Rebates are in place through December 15, 2017 or until funds are depleted.
- ❖ Submit the documentation listed below no later than December 15, 2017, however, members are encouraged to submit as soon as possible to ensure rebate:
 - ✓ This rebate form
 - ✓ A copy of your assessment

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

Electrical Usage Audit

- ❖ A free home electrical use audit is available to help members evaluate their electric bills. A Barron Electric technician will conduct an on-site visit to evaluate usage patterns and make recommendations on how to conserve energy.
- ❖ Audits are available to residential members and are on a first-come, first-serve basis and are limited to availability.
- ❖ Members are eligible for a free audit once every 5 years.
- ❖ Contact the Member Services Department to schedule an appointment.

MEMBER INFORMATION *(Please fill out entire section)*

Member Name			Email		
			<i>Email addresses will be used for cooperative communication only, including eNewsletters filled with energy saving tips. Opting out now or in the future is always available. <input type="checkbox"/> Opt out Now</i>		
Address			Barron Electric Account #		Barron Electric Map Location #
City	State	Zip	Date	Member Signature	
Phone					
Rebate for: <input type="checkbox"/> Residential <input type="checkbox"/> Farm <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institution/Government <input type="checkbox"/> Other:					

ASSESSMENT INFORMATION *(Please fill out entire section)*

Date of assessment:		Cost of Assessment:			
What is the water heater fuel type?		<input type="checkbox"/> Electric	<input type="checkbox"/> LP	<input type="checkbox"/> Other:	
What is the home heating fuel type?		<input type="checkbox"/> Electric	<input type="checkbox"/> LP	<input type="checkbox"/> Fuel Oil	<input type="checkbox"/> Other:
Who performed the audit or assessment?		<input type="checkbox"/> Home Auditor	<input type="checkbox"/> Certified Energy Manager	<input type="checkbox"/> Cooperative or Dairyland Staff	
Auditor Name:		Phone:		Email Address:	
					Total Rebate Amount Requested:

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved-Reason		
I certify the rebates requested are for equipment purchased and/or installed in 2017.		
Cooperative representative:	Date:	Total rebate issued: \$