



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

TOUCHSTONE ENERGY® HOME PROGRAM

2018 Energy Efficiency Rebate Form

(Dairyland Power Cooperative System Only)

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



- ❖ NOTE: The rebate amount for this program is \$500.
 - ❖ To qualify for the rebate:
 - ✓ A qualified rater or inspector* must verify and complete the Touchstone Energy Home checklist. A blower door test is required. Less than 3 air exchanges/hour at 50 Pascals is considered passing.
 - ❖ Must have electric water heater 50-gallons or larger, and be connected to one of Barron Electric Cooperative's load management programs.
 - *A qualified rater or inspector refers to a person who is knowledgeable in building standards, has experience in using blower door test equipment, and is approved by Barron Electric Cooperative.
 - ❖ New home must be on cooperative's lines.
 - ❖ Rebates are in place through December 14, 2018, or until funds are depleted.
 - ❖ Submit the documentation listed below no later than **December 14, 2018**, however, members are encouraged to submit as soon as possible to ensure rebate:
 - ✓ This Rebate Form
 - ✓ A copy of the checklist
 - ✓ **Submit required documentation to: Barron Electric Cooperative, PO Box 40, Barron, WI 54812**
- Attn: Member Services**

Section 1: MEMBER INFORMATION *(Please fill out entire section)*

Member Name			Email		
Address			Account		Barron Electric Map Location #
			Date		Member Signature
City	State	Zip	Phone		

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. Opt out Now

Section 2: Touchstone Energy Home *(Please fill out entire section)*

I certify the home has met the requirements defined in the checklist.

Inspector or Builder	Inspector or Builder's Signature	Date of Final Inspection
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Section 3: BLOWER DOOR TEST VERIFICATION *(Please fill out entire section)*

I certify that the home has met the requirement of less than 3 air exchanges per hour at -50 Pascal.	Air Exchanges Per Hour	Date of Blower Door Test
Name of Person Performing Blower Door Test	Signature of Person Performing Blower Door Test	

OFFICE USE ONLY

Approved Not Approved-Reason

I certify the home for which the rebate is requested has met the requirements of the above program/code requirements.

Cooperative representative:	Date:	Total rebate issued: \$
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