



RESIDENTIAL AC AND HEAT PUMP REBATE APPLICATION



All rebates must be received within 90 days of purchase

TO RECEIVE A REBATE:

1. Complete this rebate form.
2. Invoice clearly showing proof of purchase including manufacturer name, model numbers, serial numbers, date of installation, installation address, and total project cost.
3. AHRI Certificate of Product Ratings for the equipment installed. (This document can be provided by your contractor) or a copy of energy guide label containing ENERGY STAR® Symbol or denotation if applicable.

MAIL TO:

Mountain Iron Public Utilities
 ATTN: Rebate Program
 8586 Enterprise Dr. S
 Mountain Iron, MN 55768

Valid for customers of Grand Rapids Public Utilities only. Rebates are subject to available funds.

Customer Information (please complete all information below):

Name of Homeowner	Phone	Installation Date	County	
Installation Address	City		State	Zip Code
Mailing Address (if different than installation address)	City		State	Zip Code
E-Mail Address	Account Number			
Building Type (select one):	Single Family	Multi Family		

Retailer/Contractor/Installer Information

Company Name	Mailing Address	City	State	Zip Code
Phone	E-Mail Address			

Certifications and Signature

I hereby certify that:

- The information contained in this application is accurate and complete
- All installation is complete, and the unit(s) is operational prior to submitting application.
- All rules of this rebate program have been followed

I agree to verification of equipment installation which may include a site inspection by a program or utility representative. I understand that I am not allowed to receive more than one rebate from this program on any piece of equipment. I agree to indemnify, defend, hold harmless and release MIPU from any claims, damages, liabilities, costs and expenses (including reasonable attorney's fees) arising from or relating to the removal, disposal, installation or operation of any equipment or related materials in connection with the programs described in this application, including any incidental, special or consequential damages.

MIPU reserves the right to reject any rebate application submitted as a result of work performed by a contractor who has failed to adhere to the terms and conditions established for the rebate program.

Homeowner Signature (typed signature is allowed)	Print Name	Date
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LIST OF AC AND HEAT PUMP MEASURES THAT QUALIFY FOR REBATES

CENTRAL AC (units 14.5 SEER2 or higher will qualify)

REBATE: Refer to table below

Quantity: _____ Cooling Capacity: (BTU/hour): _____
 New Unit Efficiency: SEER2: _____ EER2: _____
 Manufacturer Name: _____ Model Number: _____ Date of Installation: _____

SEER2	REBATE
14.5 – 14.9 SEER2	\$50 / unit
15.0 - 15.9 SEER2	\$100 / unit
16.0 SEER2 and higher	\$150 / unit

MINI SPLIT DUCTLESS AIR CONDITIONER (units 16 SEER2 or higher will qualify)

REBATE: \$150/Unit

Quantity: _____
 Cooling Capacity: (BTU/hour): _____ SEER2: _____
 Manufacturer Name: _____ Model Number: _____ Date of Installation: _____

AIR CONDITIONER ROOM UNIT/WINDOW AC (must be ENERGY STAR® approved)

REBATE: \$10/unit

Quantity: _____ Capacity: (BTU/hour): _____
 CEER Rating: _____
 Features (select one): Reverse Cycle Louvered Style (select one): Sleeve Window
 Manufacturer Name: _____ Model Number: _____ Date of Installation: _____

CENTRAL and DUCTLESS HEAT PUMPS (must be ENERGY STAR® or over 15 SEER2 & 8.5 HSPF2)

REBATE: \$400/unit

Quantity: _____ Cooling Capacity: (BTU/hour): _____
 Heating Capacity: (BTU/hour): _____
 SEER2: _____ EER2: _____ HSPF2: _____
 Manufacturer Name: _____ Model Number: _____ Date of Installation: _____

COLD CLIMATE HEAT PUMPS (minimum 15 SEER2, 9 HSPF2 & COP>=1.75 @ 5° F)

REBATE: \$1,000/unit

Quantity: _____ *Must meet Northeast Energy Efficiency Partnership (NEEP) efficiency specifications for cold climate models
 Cooling Capacity: (BTU/hour): _____
 Heating Capacity: (BTU/hour): _____
 SEER2: _____ HSPF2: _____
 If the old system had a furnace, enter furnace capacity (Btu/hour): _____
 Manufacturer Name: _____ Model Number: _____ Date of Installation: _____