



## Duct Sealing Rebate Program

**Member Information:** (Please Print Clearly)

Member Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Service Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

**Duct Sealing Information:**

Manufactured Home: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Year: \_\_\_\_\_

Site Build Home: Yes: \_\_\_\_\_ No: \_\_\_\_\_ Year: \_\_\_\_\_

Completion Date: \_\_\_\_\_

Contractor: \_\_\_\_\_

CT Number: \_\_\_\_\_

Payment may be made to a person other than the owner of the dwelling. Payment shall be made to:

\_\_\_\_\_

(Name)

\_\_\_\_\_

(Mailing address)

I hereby request an incentive for the above listed items. Attached are copies of invoices/receipts. I certify that I have requested this conservation measure at the location indicated and that I am a Wasco Electric Member. I will allow a representative of Wasco Electric Co-op to verify installation. Programs are subject to change without notice.

By signing this agreement, members agree to release Wasco Electric Cooperative from any liability associated with the selection, installation, or operation of the equipment, which was purchased under this program, and recognizes that in no way is Wasco Electric Cooperative responsible for the safety or satisfactory performance of this equipment. Wasco Electric Cooperative will no accept any liability caused by customer participation in this program.

**Member Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Office Use Only

908.6 Amount: \$400 / \$500 Date Paid: \_\_\_\_\_ Check Number: \_\_\_\_\_