




**FRANKLIN RURAL  
ELECTRIC COOPERATIVE**

A Touchstone Energy® Cooperative 

Mail to: PO Box 437 - Hampton, IA 50441

For more information: 641-456-2557

www.franklinrec.coop

Heat Pump Compressor Replacement Rebate Application

**For Office Use Only**

Total Rebate Amount:

**Program Criteria**

- **ALL INFORMATION MUST BE COMPLETED TO RECEIVE REBATE**
- All rebates will be issued to members by way of a bill credit. Some exceptions may apply.
- Complete this form along with the specific product rebate form.

**Member Information**

Member Name

Address

City - State - Zip

Account Number

Phone (include area code: sample - 999-999-9999)

Email

**Rebate Unit Installation Information**

**Please answer questions based on the location where the unit was installed.**

**Location Installed**

- Same as above       Other  
(complete below)

Address

City - State - Zip

**Install Date**

**Structure Type**

- Single Family Residence  
 Farm Outbuilding  
 Business  
 Multi-Family Unit: apt/condo/duplex/etc.

**Rebate Unit Installed In**

- New Construction       Existing Structure

**Ownership**

- Owned       Leased

**Installer (if applicable) or Purchased From**

Business Name


Contact Name

City - State - Zip

Phone



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# Heat Pump Compressor Replacement Rebate

**For Office Use Only**

Mail to: PO Box 437 - Hampton, IA 50441  
For more information: 641-456-2557 or 1-800-750-3557  
www.franklinrec.coop

Total Rebate Amount:

**Program Criteria**

- **ALL INFORMATION MUST BE COMPLETED TO RECEIVE REBATE**
- All rebates will be issued to members by way of a bill credit. Some exceptions may apply.
- Currently operating air source or geothermal systems if not covered by manufacturer's warranty.

Member or Business Name

Account Number

**1. Compressor Type**

- Air source heat pump compressor  
Rebate \$50 per ton
- Geothermal heat pump compressor  
Rebate \$50 per ton

**4. Water Heater Type**

- Electric
- Natural gas/propane

**2. Install Date**

Additional Comments

**3. Equipment Information About Current Heating System**

**Make**

**Model**

**Serial No.**

**Cooling Capacity-tons**

**DATED COPY OF ITEMIZED SALES RECEIPT MUST BE INCLUDED.** Member certifies that the item listed in this application has been installed at the member's location served by REC. REC reserves the right to inspect home/equipment and verify this information before issuing a rebate. REC reserves the right to modify (including incentive levels) or terminate this program at any time without prior or further notice.

Member Signature

Date