

# Water Heater Rebate Application

## FreeState Electric Cooperative, East District



Date: \_\_\_\_\_ Account Number: \_\_\_\_\_

Name on Account: \_\_\_\_\_

1-800-794-1989 • 785-478-3444  
 www.freestate.coop  
 customerservice@freestate.coop

**Please enclose or attach a copy of your purchase and installation invoices when filing for a rebate.**

**Service Address:** \_\_\_\_\_  
Street or PO Box City State Zip

If service address is different than billing address, please provide the billing address below.

**Mailing Address:** \_\_\_\_\_  
Street or PO Box City State Zip

**Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Tank 1**

Date of Installation \_\_\_\_\_

Brand \_\_\_\_\_

Model # \_\_\_\_\_

Serial # \_\_\_\_\_

Size \_\_\_\_\_ (gal) Energy Factor \_\_\_\_\_

Purchased From \_\_\_\_\_

Warranty Term \_\_\_\_\_

**Tank 2** (if applicable)

Date of Installation \_\_\_\_\_

Brand \_\_\_\_\_

Model # \_\_\_\_\_

Serial # \_\_\_\_\_

Size \_\_\_\_\_ (gal) Energy Factor \_\_\_\_\_

Purchased From \_\_\_\_\_

Warranty Term \_\_\_\_\_

### Time of Use

This rate allows member to save based on their consumption habits.

	2025	2026	2027	2028
<b>Peak Rate:</b> (3-6 p.m., Monday-Friday)	30.00¢/kWh	35.00¢/kWh	40.00¢/kWh	45.00¢/kWh
<b>Off Peak Rate:</b> (Hours not listed above, plus major holidays)	11.00¢/kWh	10.75¢/kWh	10.50¢/kWh	10.25¢/kWh

### Terms and Conditions

1. If member desires to discontinue the Time-of-Use rate in less than 24 months, the member will agree to re-pay FreeState Electric Cooperative at a rate of \$10.00 per remaining months for a maximum of \$120.00.
  - a. Repayment may be made in full at time of discontinued rate of service if member desires to do so.
2. If member discontinues electrical service through FreeState Electric Cooperative the remaining balance will be added to the final bill for the account holder.
  - a. The remaining balance is transferable to a new active billing account with member approval.

**By applying for and accepting this rebate, I agree to participate in FreeState Electric Cooperative's Time of Use Rate**

**Appliant Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

#### Office Use Only:

<input type="checkbox"/> Approved	<input type="text"/>
	Staff Initial
<input type="checkbox"/> Denied	<input type="text"/>
	Staff Initial