




**Renville-Sibley  
Cooperative Power  
Association**

Your Touchstone Energy® Cooperative   
*The power of human connections*

## **Non-Residential Lighting Retrofit Rebate**

If you have questions while completing this form, please contact Renville-Sibley Cooperative Power Association weekdays during business hours for assistance.

Phone: **800-826-2593**

Send your completed applications to:

**Renville-Sibley Cooperative Power Association  
PO Box 68  
Danube, MN 56230**

Checklist for Application:

- Dated detailed invoice
- Completed Application
- Completed Rebate Form

RSCPA encourages you to conserve energy. By participating in our energy efficiency program, you can keep costs down and earn rebates when you install retro lighting equipment.

### **How Do I Qualify?**

#### **1. General Qualifications**

- Retrofit systems must result in a net load reduction in kW usage from that of the existing lighting system.
- Rebate applies to nonresidential lighting retrofit programs only.
- Rebates will be given directly to the members and will not be given to Lighting Suppliers or Contractors.

#### **2. Application—Limited Funds**

- This program is offered from January 1 through December 31 of the respective calendar year. Rebate requests are processed on a “first-come first-serve” basis. Annual rebate funds are limited. Rebate programs, qualifications, and amounts are subject to change at any time. The customer is responsible for checking with Renville-Sibley Cooperative Power Association to determine whether the program is still in effect.
- The minimum rebate application is \$50.00. The maximum rebate amount is \$1,000 per customer per calendar year and is limited to up to 50% of the project costs.
- Submitting incomplete or missing information will delay processing of the incentive.

#### **3. Disclaimer**

- The Cooperative gives no warranties, expressed or implied, with respect to equipment operation, material, workmanship or manufacturing. The Cooperative does not guarantee that the implementation of energy-efficient measures or use of equipment purchased or installed pursuant to this program will result in energy or cost savings. In no event shall the Cooperative be liable for any incidental or consequential damage. The Cooperative is not responsible for the disposal of lamps and/or ballasts replaced as a result of this program.
- The Cooperative reserves the right to verify sales transactions and inspect projects.

#### **4. Privacy**

- Information contained in this rebate application may be shared with the Department of Commerce.

#### **5. Rebate Exclusions**


- The Cooperative is not liable for rebates promised to a customer as a result of a contractor misrepresenting the program.
- Customers must apply for rebates within a year of the purchase date shown on the equipment invoice.

*This institution is an equal opportunity provider and employer.*



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# Non-Residential Lighting Retrofit Rebate Form

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*Complete these easy steps to get your rebate.*

**STEP 1: ENTER CUSTOMER INFORMATION (please print clearly)**

Customer Name \_\_\_\_\_  
 Account Number \_\_\_\_\_ Location Number \_\_\_\_\_  
 Phone \_\_\_\_\_ Email \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**STEP 2: ENTER EQUIPMENT INFORMATION IN THE APPLICATION FORM**

Complete and sign application form.

**STEP 3: ENTER VENDOR INFORMATION**

Vendor Name \_\_\_\_\_ Vendor Contact Name \_\_\_\_\_  
 Vendor Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Fax \_\_\_\_\_ Email \_\_\_\_\_

**STEP 4: ATTACH NECESSARY DOCUMENTATION**

*The following document must be submitted with your rebate application.*

Copy of dated invoice(s) specifying the quantity and price of all materials purchased, date ordered, installation costs and applicable taxes. The invoice(s) should also specify the contractor's name and address as well as the customer's name and installation address.

**STEP 5: CUSTOMER SIGNATURE**

I hereby certify that all information is accurate. I have read all information on this form and agree that Renville-Sibley Cooperative Power may verify all the information that I have provided.

X \_\_\_\_\_ Date \_\_\_\_\_

**FOR RSCPA USE ONLY. DO NOT WRITE IN THIS AREA.**

Approved By \_\_\_\_\_ G/L # \_\_\_\_\_  
 Date \_\_\_\_\_ Date ER Paid \_\_\_\_\_  
 Rebate Amount \_\_\_\_\_ Amount ER Paid \_\_\_\_\_  
 kW Reduction \_\_\_\_\_