## **About You**

Full Name		
Street Address		
City, State, Zip Code		
Phone Number(s)		

## **About Your New/Replacement Unit**

Replacing?	Furnace	Baseboard	Ceiling Cable	Heat Pump
Manufacturer				
Model # (Indoor)		Mod	del # (Outdoor)	
Serial # (Indoor)		Ser	ial # (Outdoor)	
Total Resistance Heat	(KW)			
Unit Size (Tonnage)				
SEER Rating				
HSPF Rating				

## **About Your Home**

Square Feet of Home	Age of Home
Signature of Member	
Date	Account #
OEC Location #	

Please mail complete form to: Rebate:

Owen Electric Cooperative, Inc. Attn: Jude Canchola PO Box 400 Owenton, KY 40359-0400

The entire form must be completed within 60 days of installation to be eligible for rebate. Details and terms are subject to change without notice. AHRI certificate is required.

Questions? Contact Jude Canchola at jcanchola@owenelectric.com.