|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  | | | | **EV Chargers** | | | | | |
| *This institution is an equal opportunity provider.* | | | | **2023 Energy Efficiency Incentive Form** | | | | | |
| **ELIGIBILITY CRITERIA** | | | | | | | | | |
| * New EV charger must be installed on cooperative’s lines. * Incentive not to exceed the EV charger cost. * Incentives are in place through December 31, 2023. Funds are limited so submit required documentation as soon as possible. * Required documentation must be submitted within 3 months of EV charger install date. * Additional eligibility criteria may apply. Program is subject to change or cancellation without notice. Contact cooperative for details. * Required documentation listed below must be submitted no later than 3 months after EV charger install date.   + This incentive form   + A copy of your receipt or invoice for each item with purchase price(s) circled   + For EV charger, include documentation showing the station has been installed   **Submit required documentation to: *Taylor Electric Cooperative, N1831 State Hwy 13, Medford, WI 54451*** | | | | | | | | | |
| **MEMBER INFORMATION**  *(Please fill out entire section)* | | | | | | | | | |
| Member Name | | | | Email    *Email addresses will be used for cooperative communication only.* | | | | | |
| Address | | | | Account | | Phone | | | |
| City | State | | Zip | Date | | Member Signature | | | |
| Incentive for: Residential Farm Commercial Industrial Institution/Government Other: | | | | | | | | | |
| **INCENTIVE INFORMATION** *(Please fill in gray shaded boxes for requested incentives)* | | | | | | | | | |
| **Equipment** | | **Specifications** | | | **Quantity** | | | **Incentive** | **Total**  ***Quantity x Incentive*** |
| Electric Vehicle Charging Station | | Must be on load control as defined by cooperative | | |  | | | $400 |  |
| Smart Electric Vehicle Charging Station with integrated metering | | Must be on load control as defined by cooperative | | |  | | | $800 |  |
| **Total Incentive Amount Requested:** | | | | | | | | |  |
| **OFFICE USE ONLY** | | | | | | | | | |
| Approved  Not Approved - Reason: | | | | | | | Total Incentive Issued: $ | | |
| Cooperative Representative: | | | | | | | Date: | | |