



REBATE FORM

Please fill out the information below with the assistance of you appliance dealer or contractor. If you have any question about completing this form, please call your local NWE office weekdays, 8 a.m. - 5 p.m. NOTE: This equipment installed where electricity is provided directly from NWE on a retail basis. The amount of your actual rebate is based upon the size and energy efficiency rating of the equipment installed. NWE is not responsible if your dealer provided you with incorrect information about the amount and or conditions of the actual rebate.

Purchaser's Information	Please Print or Type										
	Purchaser Name		First	MI	Last	Home Telephone					
	Address				Work Telephone						
	City	State	Zip	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NWE CUSTOMER ACCT. # WHERE EQUIPMENT IS BEING USED
	Customer Type:	Residential <input type="checkbox"/>	Landlord <input type="checkbox"/>	Builder <input type="checkbox"/>	Commercial <input type="checkbox"/>						
	Type or Building:	Apartment <input type="checkbox"/>	Single Family Dwelling <input type="checkbox"/>	Mobile Home <input type="checkbox"/>	Commercial <input type="checkbox"/>						
	New Construction <input type="checkbox"/>		Existing Building <input type="checkbox"/>		LIST NAME AND ADDRESS WHERE APPLIANCE WILL BE USED IF DIFFERENT FROM ABOVE.						
	Name	Address		State	Zip						
	Rebate should be paid to:										
	Purchaser <input type="checkbox"/>	User <input type="checkbox"/>	Purchaser Signature								
Dealer Info.	Dealer / Contractor				Telephone						
	Address				Sales Person or Contractor Signature						
Equipment Info.	Equipment Type (one per rebate form)				Size, Capacity, or First Hour Rating						
	Make		Model Number		Date Installed						
	Serial Number		Efficiency Rating		Rebate Amount						
	For Office Use Only - Do Not Write in this Area										
Rate Class			Peak Periods			Controlled Load (Yes / No)					
Equipment Controlled By NWE				Meter #		Date Set					

Important: Be sure this form is complete, including serial number, copy of dated sales receipt and purchasers signature to qualify for your rebate.

Mail Rebate Form to: NWE Rebate Request, P.O. Box 9, Grantsburg, WI 54840
or Fax it to: (715) 463-2765. Questions call NWE at (800) 261-1200.