



ENERGIZE MISSOURI HOMES

MISSOURI DEPARTMENT OF NATURAL RESOURCES



**HOMEOWNER UPGRADES
and GEOTHERMAL** 

REBATE REQUEST FORM

Instructions

This form should be completed after all upgrades are finalized. The property identified in this form must match the property identified in the Audit Summary Form submitted at the beginning of the process. Additionally, all measures installed and identified in this form must match those identified and approved in the Audit Summary Form.

In order to process the Rebate Request, please submit this completed form to your Program Aggregator. The completed rebate request materials package needs to be sent in its entirety by mail or by e-mail. In addition, please keep a copy of this form for your records.

Property Information

Applicant Name:	<input type="text"/>	Applicant Phone #::	<input type="text"/>
Property Street Address:	<input type="text"/>	Applicant E-mail:	<input type="text"/>
City:	<input type="text"/>	Program Aggregator: <input type="text"/>	
State:	<input type="text"/>		
Zip Code + 4:	<input type="text"/>		
County:	<input type="text"/>		

List of Equipment/Materials

	EQUIPMENT/MATERIALS	QUANTITY	*MANUFACTURER	*MODEL	*SERIAL NUMBER
1.					
2.					
3.					
4.					
5.					
6.					
7.					
8.					
9.					
10.					

*For equipment/materials over \$5,000.00 please provide the manufacturer, model and serial number details by completing the corresponding columns in this table. The information can be found in the equipment specification sheets.



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Project Cost

For every paid invoice and receipt related to this project, please provide the information requested below. Verify that all invoices are included as attachments to this form and that the total dollar amount for these invoices and receipts equals the Total Project Cost.

INVOICE/RECEIPT - DATE OF PAYMENT	DESCRIPTION OF MEASURE/ACTIVITY	AMOUNT (\$)
TOTAL PROJECT COST		

Program Activities and Rebate Amount

	(A)	(B)	(C)	(A) x (B)
	TOTAL PROJECT COST (\$)	ELIGIBLE REBATE AMOUNT	MAXIMUM REBATE AMOUNT	REQUESTED REBATE AMOUNT
Audit		100.00%	\$500.00	
Tier I		50.00%	\$2,000.00	
Tier II		70.00%	\$7,000.00	
Tier III		50.00%	\$10,000.00	
TOTAL REQUESTED REBATE AMOUNT				\$

*Requested Rebate Amount cannot exceed the Maximum Rebate Amount.

Required Documents to Process Rebate

- Signed Rebate Request Form
- Photo of the Home Facade
- W-9 Form
- Paid Invoices and Receipts
- Map Showing Location of Home

Signatures

I, _____ certify the upgrades listed in this form have been performed at the location identified, and that all equipment and measures are installed and operational.

HOMEOWNER NAME

Homeowner Signature

Date