

HVAC New Cooling Equipment Program Incentive Application



CUSTOMER INFORMATION

Ameren Illinois Electric Account #: _____ (Acc # where equipment was installed)

NAME _____ HOME PHONE (_____) _____ CELL PHONE (_____) _____

INSTALLED ADDRESS _____ CITY _____ STATE _____ ZIP _____

PROGRAM ALLY INFORMATION

INSTALLED BY (PROGRAM ALLY) _____ PHONE (_____) _____

PROGRAM ALLY ADDRESS _____ CITY _____ STATE _____ ZIP _____

EXISTING EQUIPMENT (This section **MUST** be completed if there is an existing unit that is being replaced)

EQUIPMENT INFORMATION

Central AC Heat Pump AGE _____ years COOLING CAPACITY _____ Tons Rated SEER _____
 Geothermal None
MANUFACTURER (existing) _____ MODEL #(existing) _____

NEW EQUIPMENT (Must have a SEER rating of 14 or above)

Right Sizing (**attach Manual J input and output**) - \$120

NEW CENTRAL AIR CONDITIONER Replaces a SEER greater than 10 - \$110

NEW AIR SOURCE HEAT PUMP Replaces an **operable** unit w/ a SEER rating of 10 or less (**Early Retirement**) - \$600

AHRI # _____ COOLING CAPACITY _____ Tons (For \$600 Early Retirement Incentive refer to sec. 3 of the Terms and Conditions – second page of this form)

SEER _____ HSPF (when available) _____ **RESERVATION #** _____

NEW GROUND SOURCE HEAT PUMP Right Sizing (**attach Manual J input and output**) - \$120

Ground Source Heat Pump - \$600

AHRI # _____ COOLING CAPACITY _____ Tons EER _____ COP _____

ENERGY STAR PROGRAMMABLE THERMOSTAT—if it is replacing a **Non-Programmable** Thermostat.

NOTE: Contractor will show type of thermostat installed on invoice and customer can go to ActOnEnergy.com for rebate form or call 866-838-6918 (\$25 rebate for qualifying equipment)

I hereby request an incentive for the above listed work. **Attached is a copy of my invoice to the customer showing the Act On Energy Incentive.** I have read and agree to the Terms and Conditions on the reverse of this form. I certify that the information that I have provided is true and correct and that the new HVAC equipment and existing SEER meet the Program Guidelines and Terms and Conditions of the program. The General Program Ally Rules and Guidelines set forth in my HVAC New Equipment Programs Program Ally Application are incorporated herein by this reference.

PROGRAM ALLY SIGNATURE _____

DATE _____

I confirm that the equipment above has been installed and that I have received an invoice showing the Act On Energy Incentive. I have read and agreed to the Terms and Conditions on the reverse of this form

CUSTOMER SIGNATURE _____

DATE _____

APPLICATION CHECKLIST

- ✓ Attach copies of all invoices with equipment make, model and size, documenting the installation of the equipment and Manual J input and output. Invoice shows Act On Energy Incentive mark down.
- ✓ Complete all questions, read all terms and conditions, and sign the application.
- ✓ Make sure the customer's Ameren Illinois Utilities electric account number is listed above.
- ✓ Make a copy of the application for your records and mail original form with attached Program Ally invoice to:
Residential HVAC New Equipment Program, 300 Liberty St., 4th Floor, Peoria, IL 61602

Please direct all correspondence to:

Ameren Illinois Act On Energy Residential Programs
300 Liberty Street, 4th Floor, Peoria, IL 61602

Fax: 309-673-3370 • Toll-free: 866-838-6918 • ActOnEnergy.com



TERMS AND CONDITIONS

1. Customer Eligibility

Customer must be a residential electric customer of Ameren Illinois Utilities (AmerenCIPS, AmerenCILCO and AmerenIP) to qualify. Equipment purchases and installations made between May 1, 2009 and April 30, 2010 are eligible for incentives or until incentive funds are exhausted. Equipment must be installed by a participating Program Ally at the customer's address listed on the Incentive Application Form. The Incentive Application Form must be filled out completely, signed and accompanied by dated invoices, and received by April 30, 2010. Incentives will only be paid from the date a contractor signs with the program, they are not retroactive.

2. Incentive Limits

Individual dwelling units, as determined by account number, whether owner occupied or rental property, are eligible for up to a maximum of two system incentives. A separate Incentive form is required for each unit. Each new unit installed MUST have a rating of 14 SEER or greater. The Program reserves the right to limit the number of incentives to owners of multiple individually metered dwelling units during one program year. Owners of multiple units are required to contact the program and reserve funds prior to any installations.

3. 48-Hour Waiting Period and Required Reservation for Replacing Air Source Units with SEER Less Than or Equal to 10

To qualify for the Early Retirement Incentive the existing equipment must be in working order and must have a SEER rating of 10 or less. A Reservation # is also required. Program Ally must send email to ResidentialHVAC@csgpr.com with customer name, address, phone number, and make and model information for verification of the rated SEER of the existing unit. A Reservation # will be issued or denied within 48 hours during which the Program may opt to verify the information through a site visit. In no case shall an installation take place without a Reservation # nor shall the replacement take place until the 48-hour inspection window has expired. Reservations will be valid for 45 days and then will expire unless renewed by the Program Ally.

4. Installation Verification

Prior to honoring any incentive request, Act On Energy reserves the right to conduct an on-site verification that the equipment has been installed according to Program Guidelines and is in operation. This site visit, and all aspects related to the site visit, is conducted solely for such purpose. The site visit is not a safety review, nor is it intended for any other purpose.

5. Documentation

All invoices must include the Program Ally name / address / phone number, installation cost, and an itemized description of the equipment, including manufacturer, model number, and the appropriate efficiency ratings (SEER, EER, HSPF, and/or COP). If requesting a Right Sizing Incentive, Manual J input and output must be attached. Invoices must show a line item reduction matching the incentive to be paid to the Program Ally and labeled as the "Act On Energy Incentive."

6. Warranties

Ameren Illinois Utilities and their Incentive Administrator do not endorse, guarantee, or warrant any particular contractor, manufacturer, or installation. Ameren Illinois Utilities and Program Ally are independent contractors, and are not responsible for the acts of each other or each other's employees.

7. Changes to Residential New HVAC Equipment Program

Program is subject to termination or change without prior notice, and incentive offers may increase or decrease at any time.

8. Liability and Release

As part of the consideration for participating in the program, Customer and Program Ally hereby release and shall indemnify, hold harmless, and defend Ameren Illinois Utilities and their Incentive Administrator from any and all claims, losses, harm, costs, liabilities, damages, and expenses (including attorneys' fees) of any nature whatsoever arising directly or indirectly out of or in connection with the installation of New HVAC Equipment at the premises or any material and labor required for such installation.

FREQUENTLY ASKED QUESTIONS

1. What is the purpose of the Residential New HVAC Equipment Program?

The purpose of the program is to encourage customers to purchase and install energy-efficient equipment. Ameren Illinois Utilities provides an incentive to cover a portion of the additional cost for purchasing the energy-efficient equipment versus standard efficiency equipment.

2. How do I determine whether equipment meets the standards?

A Program Ally who is uncertain about whether equipment meets the efficiency criteria should check with a local distributor or manufacturer. For questions regarding eligible equipment, please call Act On Energy at 1-866-838-6918.

3. When will incentives be paid?

Completed incentive applications received by the conclusion of a calendar month will be paid the following month with a detailed explanation of the customers included in the payment.

Please direct all correspondence to:
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300 Liberty Street, 4th Floor, Peoria, IL 61602

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