

# Multifamily In-Unit Energy Efficiency Program Materials Request Form



Site Information			
Complex Name			
Address			
City/State/Zip Code			
Contact Person & Title			
Phone & Email Address		(    )	@
Number of total buildings in project:		Number of total units in project:	
Water heater fuel – Gas or Electric:		Number of water heaters:	
Ameren Illinois electric account # (required)			
Ameren gas account # (required)			
Project Order Details	# Needed	Existing Wattage	Location
	High use areas only - minimum of 3hrs use each day and only in approved rooms.	Of incandescent light bulbs (You may use average wattage replaced for each type CFL – see chart on back.)	Room to be installed in.
15 watt CFL			
20 watt CFL			
23 watt CFL			
2.00 gpm showerhead		Order 15W CFL to replace 60W incandescent	
bathroom faucet aerator			
kitchen aerator		Order 20W CFL to replace 75W incandescent	
1/2" pipe insulation	total feet		
3/4" pipe insulation	total feet	Order 23W CFL to replace 100W incandescent	
Shipping Details (if location to ship materials to is same as above, write "SAME")			
Complex Name:			
Street Address:			
City/State/Zip Code:			
Ship Attention To:			
Phone:			
Special Shipping Instructions (if needed):			
Print Name:		Date:	
Signature:		Contact number:	

**Note:**

- See back of form for: How to Participate, Product Descriptions and Ordering Tips.
- Include copy of Ameren Illinois electric and/or gas bill showing account number for this property (required).
- All unused material must be returned to the Act On Energy Program. Please call for details.

