



2023 Incentive Application Residential Programs

Ready to get your incentive? Follow these 3 simple steps.

Step #1: Confirm the details

- » You are a HomeWorks Tri-County Electric Co-op residential electric member.
- » Items were installed or purchased between January 1, 2023 and December 31, 2023.
- » Review individual measures for eligibility requirements.

Step #2: Attach a copy of your receipts and invoices

- » Provide a recent copy of a utility bill.
- » Please provide copies of all receipts and/or invoices from product purchases and installations.
- » Your receipt or invoice must clearly indicate the equipment type, make, model, price, and date of purchase or installation.
- » For equipment requiring licensed contractor installation, include an invoice from the installing contractor detailing equipment installed and marked paid in full.
- » For electric vehicle incentives, a copy of the vehicle registration is required. Address on registration must match service address.

Step #3: Get your incentive

- » Completed documentation must be received within 60 days of installation.
- » Incentive payment is limited to 100% of project cost.
- » For the full program Terms and Conditions, please refer to page 8 of the application.

Submit your documents one of four ways:



Call **877.296.4319** for questions about this application.

Member Information

| | | | | |
|--|--|--------------|--|--|
| Member Name (as it appears on electric bill): | Cell Phone: | Home Phone: | Email: | |
| Installation Address (where equipment is installed): | City: | State: MI | ZIP: | |
| Mailing Address (if different than above): | City: | State: | ZIP: | |
| Preferred method of follow-up communication: <input type="checkbox"/> Postal mail <input type="checkbox"/> Email <input type="checkbox"/> Home phone <input type="checkbox"/> Cell phone | | | | |
| Electric Utility Account Number (found on monthly bill): | Property Type (check all that apply): <input type="checkbox"/> Single-Family <input type="checkbox"/> Condo <input type="checkbox"/> Townhouse <input type="checkbox"/> Other | | Rental Property: <input type="checkbox"/> Yes <input type="checkbox"/> No | |
| Does home have central AC or heat pump? <input type="checkbox"/> Yes <input type="checkbox"/> No | Water heating fuel type: <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> Other_____ | | | |
| Primary fuel for home heating (check one): <input type="checkbox"/> Natural Gas <input type="checkbox"/> Electric <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> Other_____ | | | Check one: <input type="checkbox"/> Existing home <input type="checkbox"/> New construction | |

Trade Ally/Contractor Information

| | | | | |
|----------------------------|-------------|---------------------------|--------|------|
| Company Name: | | Contact Name: | | |
| Company Address: | | City: | State: | ZIP: |
| Office Phone: | Cell Phone: | Email: | | |
| HVACR License Number: | | HVACR Licensee Name: | | |
| Electrical License Number: | | Electrical Licensee Name: | | |

Rebate Payment Information

| | | | | |
|---|--|---|-------------------|-------|
| Section A Make Check Payable to: <input type="checkbox"/> Member <input type="checkbox"/> Landlord <input type="checkbox"/> Trade Ally/Contractor | | | | |
| Section B Complete section below only if rebate will be paid to the Contractor or Landlord | | | | |
| Payee Name (as shown on income tax return): | | Payee Business Name (if different than payee name): | | |
| Payee Email: | | Payee Home Phone: | Payee Cell Phone: | |
| Payee Address: | | City: | State: | ZIP: |
| Mail Check to: <input type="checkbox"/> Payee Address <input type="checkbox"/> Installation Address <input type="checkbox"/> Alternate Address (complete below): | | | | |
| Alternate Pay Address (optional): | | City: | State: | ZIP: |
| Payee Federal Tax Classification (check ONE only): <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietor/Individual <input type="checkbox"/> LLC <input type="checkbox"/> Other tax exempt organization or government agency | | | | |
| Payee Taxpayer Identification Number (TIN) (must match payee legal name above): FEIN #: _____ - _____ OR SSN: _____ - _____ - _____ | | | | |
| Certification: the following certifications are required in order for this form to substitute for the IRS form W-9. Under penalties of perjury, I certify that: 1. The payee's TIN is correct. 2. The payee is not subject to backup withholding due to failure to report interest and dividend income. 3. The payee is a U.S. citizen. The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding. | | | | |
| Payee Signature: /S/ | | Print Name: | Title: | Date: |

Signature

| | |
|---|-------------|
| The Residential Incentive Application cannot be processed unless all of the appropriate fields on this application are complete. This application is valid for products installed between January 1, 2023 and December 31, 2023. I have read and understand the Terms and Conditions. I certify the information I have provided is true and correct, and the product(s) for which I am requesting an incentive meets the requirements in this application. I have elected to utilize electronic signatures. I understand and intend that a legal signature is formed by typing my name on this document. If any of the parties do not wish to sign this document electronically, all must opt out together and print a paper copy to sign manually. | |
| Member Signature: /S/ | Print Name: |



2023 Incentive Application

Residential - Appliances

Appliances

- Products must be new and in working condition. Refurbished products are not eligible for incentives.
- ENERGY STAR® products can be verified at energystar.gov/productfinder

| Measures | Specifications | Date Installed | Quantity | Incentive Amount | Total Incentive |
|---|---|----------------|----------|------------------|-----------------|
| Portable Room Dehumidifier | ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____ | | | \$30 | \$ |
| Room Air Conditioner | ENERGY STAR qualified. Limit 4 per install address. Manufacturer: _____ Model #: _____ | | | \$30 | \$ |
| Room Air Purifier | ENERGY STAR qualified. Limit 1 per install address. Manufacturer: _____ Model #: _____ | | Limit 1 | \$50 | \$ |
| Clothes Washer | ENERGY STAR qualified. Limit 1 per install address. Dryer Type: <input type="checkbox"/> Electric <input type="checkbox"/> Gas Manufacturer: _____ Model #: _____ | | Limit 1 | \$40 | \$ |
| Clothes Dryer: Electric with Moisture Sensor | Standard electric dryer. Must be ENERGY STAR qualified. Limit 1 per install address. Manufacturer: _____ Model #: _____ | | Limit 1 | \$40 | \$ |
| Clothes Dryer: Electric Heat Pump | ENERGY STAR qualified heat pump dryer. May be vented or ventless. Standard electric dryers do not qualify if they do not have a heat pump. Limit 1 per install address. Manufacturer: _____ Model #: _____ | | Limit 1 | \$200 | \$ |
| Refrigerator | ENERGY STAR qualified. Limit 1 per install address. Compact fridge excluded. <input type="checkbox"/> Side by Side <input type="checkbox"/> Top Freezer <input type="checkbox"/> Bottom Freezer <input type="checkbox"/> Single Door Manufacturer: _____ Model #: _____ | | Limit 1 | \$50 | \$ |
| Chest Freezer or Upright Freezer | ENERGY STAR qualified. Limit 1 per install address. Manufacturer: _____ Model #: _____ | | Limit 1 | \$40 | \$ |
| Induction Range/ Stove | Induction range, stove, or cooktop with a minimum of 3 burners. Portable induction cooktops and gas ranges or stovetops do not qualify. Electric only. Manufacturer: _____ Model #: _____ | | Limit 1 | \$500 | \$ |
| Type of cooking fuel being replaced: <input type="checkbox"/> Electric <input type="checkbox"/> Natural Gas/LP <input type="checkbox"/> New Construction | | | | | |
| Total Incentives for Appliances: | | | | \$ | |



2023 Incentive Application

Residential - HVAC

HVAC Equipment Eligibility Verifications

- Licensed Michigan Mechanical contractor installation required for all heat pump measures, except heat pump water heater.
- Installation invoice must be provided.
- Central Air-Source Heat Pumps may require furnace/air handler, indoor unit (coil), and outdoor unit model numbers to verify efficiency rating and meet program efficiency minimums.
- Heat pump efficiency can be verified at: AHRIdirectory.org and/or ashp.neep.org

| Measures | Specifications | | Quantity | Incentive Amount | Total Incentive | |
|--|---|--------------------------------|--|--|-----------------|--|
| Central Air-Source Heat Pump Requires licensed mechanical contractor Tier 1: AHRI Rated Minimum 15.0 SEER (14.3 SEER2) and 8.5 HSPF (7.1 HSPF2) ■ Efficiency rating listed on invoice, within product model number, or on manufacturer brochure may not be the same as the rated system efficiency. Verify efficiency rating at AHRIdirectory.org before purchase. Tier 2: NEEP ccASHP ■ Must be listed on ashp.neep.org | SEER or SEER2: | HSPF or HSPF2: | | Tier 1 \$1,000 Tier 2 \$1,500 | \$ | |
| | Manufacturer: | | | | | |
| | Model # (indoor): | | | | | |
| | Serial # (indoor): | | | | | |
| | Model # (outdoor): | | | | | |
| | Serial # (outdoor): | | | | | |
| | AHRI Ref #: | | | | | |
| | Type of heating system being replaced or displaced: <input type="checkbox"/> Electric Resistance/Electric Baseboard Heat <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Ground-Source Heat Pump <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction/Addition <input type="checkbox"/> Previously Unconditioned <input type="checkbox"/> Adding Air Conditioning | | | | | |
| Mini/Multi-Split Air-Source Heat Pump Requires licensed mechanical contractor Tier 1: Minimum 17.0 SEER (16.0 SEER2) and 9.0 HSPF (7.8 HSPF2) Tier 2: NEEP ccASHP ■ Must be listed on ashp.neep.org | SEER or SEER2: | HSPF or HSPF2: | # of Indoor Units: | \$100 | \$ | |
| | Manufacturer: | | # of Outdoor Units: | | | |
| | Model # (indoor): | | | | | |
| | Serial # (indoor): | | | | | |
| | Model # (outdoor): | | Tier 1 \$900 Tier 2 \$1,400 | | | |
| | Serial # (outdoor): | | | | | |
| | AHRI Ref #: | | | | | |
| | Type of heating system being replaced or displaced: <input type="checkbox"/> Electric Resistance/Electric Baseboard Heat <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Ground-Source Heat Pump <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction/Addition <input type="checkbox"/> Previously Unconditioned <input type="checkbox"/> Adding Air Conditioning | | | | | |
| Air-to-Water Heat Pump ■ COP of ≥1.7 at an outdoor air temperature of 5°F and an output water temperature of 110°F ■ Requires licensed mechanical contractor | <input type="checkbox"/> Mono-block | <input type="checkbox"/> Split | | \$2,000 | \$ | |
| | Manufacturer: | | | | | |
| | Model #: | | | | | |
| | Serial #: | | | | | |
| | Type of heating system being replaced or displaced: <input type="checkbox"/> Electric Resistance/Electric Baseboard Heat <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Ground-Source Heat Pump <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction/Addition | | | | | |



2023 Incentive Application

Residential - HVAC

| Measures | Specifications | Quantity | Incentive Amount | Total Incentive | |
|---|--|--------------------------|------------------|-----------------|----|
| Ground-Source Heat Pump <ul style="list-style-type: none"> Minimum EER 19.0 Includes Well-Connect, replacement ground source heat pump or new ground source heat pump Requires licensed mechanical contractor | EER (full load): | | \$1,500 | \$ | |
| | <input type="checkbox"/> Open-Loop System <input type="checkbox"/> Closed-Loop System | | | | |
| | <input type="checkbox"/> Water-to-Air System <input type="checkbox"/> Water-to-Water System | | | | |
| | Manufacturer: | | | | |
| | Model #: | | | | |
| | Serial #: | | | | |
| | AHRI Ref #: | | | | |
| Type of heating system being replaced or displaced: <input type="checkbox"/> Electric Resistance/Electric Baseboard Heat <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Ground-Source Heat Pump <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction/Addition <input type="checkbox"/> Previously Unconditioned <input type="checkbox"/> Adding Air Conditioning | | | | | |
| Ground Loop for Heat Pump New closed loop heat exchanger | New/replacement ground loop installed with eligible ground source heat pump | Limit 1 | \$2,500 | \$ | |
| Desuperheater for Ground-Source Heat Pump <ul style="list-style-type: none"> Must be connected a ground-source heat pump with desuperheater for domestic hot water generation Must be connected to ELECTRIC back-up water heater | Model # (storage tank): | | \$500 | \$ | |
| | Model # (ground-source heat pump): | | | | |
| Complete System Bonus <ul style="list-style-type: none"> Install a new Central Air-Source Heat Pump or Ground-Source Heat Pump AND a furnace or air handler with ECM blower at the same time. Central ASHP or GSHP must qualify for an equipment incentive to be eligible for the bonus. | | Limit 1 Bonus per System | \$200 | \$ | |
| Wi-Fi Enabled Thermostat Thermostat must control an HVAC system with an air conditioner or heat pump and/or electric heat. <ul style="list-style-type: none"> 1 per electric baseboard 1 per central A/C or central heat pump 1 per mini split outdoor unit | Manufacturer: | | \$50 | \$ | |
| | Model #: | | | | |
| Heat Pump (Hybrid Electric) Water Heater Minimum 2.0 UEF | UEF: | Capacity: | | \$700 | \$ |
| | Manufacturer: | | | | |
| | Model #: | | | | |
| | Serial #: | | | | |
| | Type of water heater being replaced: <input type="checkbox"/> Electric Resistance <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction | | | | |
| Electric Resistance Water Heater <ul style="list-style-type: none"> Whole-home electric tank or point-of-use electric tank Tankless water heaters are not eligible Does not require licensed contractor | Type: <input type="checkbox"/> High Durability Plastic Tank <input type="checkbox"/> Standard Electric Tank <input type="checkbox"/> Point-of-Use Tank | | \$50 | \$ | |
| | Manufacturer: | | | | |
| | Model #: | | | | |
| | Type of water heater being replaced: <input type="checkbox"/> Electric Resistance <input type="checkbox"/> Natural Gas <input type="checkbox"/> Propane <input type="checkbox"/> Oil <input type="checkbox"/> Wood <input type="checkbox"/> New Construction | | | | |
| Energy Recovery Ventilator <ul style="list-style-type: none"> ERV and HRV qualify Equipment should be equipped with freeze/frost protection Minimum CFM 40 Limit 2 per install address | Manufacturer: | Limit 2 | \$500 | \$ | |
| | Model #: | Quantity: | | | |
| ENERGY STAR Whole-Home Dehumidifier <ul style="list-style-type: none"> Must be ENERGY STAR certified Portable units are not eligible for this incentive. | Manufacturer: | Limit 1 | \$700 | \$ | |
| | Model #: | | | | |
| Efficient Circulation Pump <ul style="list-style-type: none"> Must be ECM/permanent magnet motor For hydronic heating systems only | Manufacturer: | | \$200 | \$ | |
| | Model #: | | | | |
| Total Incentives for HVAC: | | | | \$ | |



2023 Incentive Application

Residential - Other

Eligibility Verifications

- Licensed Michigan Electrical contractor installation required for panel upgrade and home battery.
- Copy of vehicle registration required for electric vehicles.

| Measures | Specifications | Quantity | Incentive Amount | Total Incentive |
|--|---|----------|--------------------|-----------------|
| Electrical Panel Upgrade <ul style="list-style-type: none"> ■ Up-sizing service panel capacity, adding a sub-panel, or increasing service capacity to the home. ■ Must be tied to another qualifying major electrification measure such as a heat pump, heat pump water heater, or electric vehicle. ■ Requires licensed electrician and electrical permit | Pre-Upgrade Amperage Capacity: | Limit 1 | \$500 | |
| | Post-Upgrade Amperage Capacity: | | | |
| | Model Number of New Electrical Panel/Load Center: | | | |
| Electric Golf Cart <ul style="list-style-type: none"> ■ Fuel switching from gas to battery electric. ■ Replacement of existing electric golf cart not eligible. | Manufacturer: | | \$300 | |
| | Model #: | | | |
| New Electric Vehicle Fill out information below | <ul style="list-style-type: none"> ■ Vehicle registration address must match member's utility service address. ■ Must be a full battery electric vehicle. Plug-in hybrids are not eligible. | | \$1,500 \$3,000 | |
| Used Electric Vehicle Fill out information below | <ul style="list-style-type: none"> ■ Vehicle registration address must match member's utility service address. ■ Must be a full battery electric vehicle. Plug-in hybrids are not eligible. | | \$750 \$1,500 | |
| Residential Level 2 (L2) Charging Station <ul style="list-style-type: none"> ■ Fill out information below ■ Must be installed by Electrical Contractor licensed by the State of Michigan. | <ul style="list-style-type: none"> ■ ENERGY STAR certified Level 2 charging station. ■ Networked (smart) charging station must be able to connect to the internet via WiFi connection for app or web-based charging control. | | \$600 | |
| Total Incentives for Other: | | | | \$ |



| Electric Vehicle Information | | | | |
|------------------------------|-------|------|--|------------------|
| Make | Model | Year | Type of Purchase <input type="checkbox"/> New <input type="checkbox"/> Used | Date of Purchase |
| | | | | |
| | | | | |

| Level 2 Electric Vehicle Charging Station Information | | | |
|---|------------------------------------|------------------------|---|
| Please complete the following section about your installed electric vehicle charging station and associated installation costs. Accurate cost information will help the program better understand typical installation costs. | | | Electric Vehicle Type <input type="checkbox"/> New <input type="checkbox"/> Used |
| Charging Station Manufacturer | Charging Station Model | Where Purchased | Charging Station Equipment Cost |
| Charging Station Purchase Date | Charging Station Installation Date | Installer Name/Company | Installation Cost |



2023 Incentive Application


Residential - Lawn


Residential Lawn Items


- Equipment must be new and in working condition. Used or refurbished equipment is not eligible for incentives.


| Measures | Specifications | Quantity | Incentive Amount | Total Incentive |
|--|-----------------------------|----------|------------------|-----------------|
| Electric Walk-Behind Lawn Mower <ul style="list-style-type: none"> ■ Electric push or self-propelled walk-behind lawn mower. ■ Battery-electric cordless or corded. ■ Mower must be charged/plugged-in within HomeWorks service territory. <p>Type of lawn mowing equipment being replaced or displaced:</p> <p><input type="checkbox"/> Gasoline walk-behind mower</p> <p><input type="checkbox"/> Gasoline riding mower</p> <p><input type="checkbox"/> Reel push mower (no engine)</p> <p><input type="checkbox"/> Electric corded walk-behind mower</p> <p><input type="checkbox"/> Electric cordless walk-behind mower</p> <p><input type="checkbox"/> No previous mower</p> <p><input type="checkbox"/> Other: _____</p> | <p>Brand:</p> <p>Model:</p> | Limit 1 | \$50 | \$ |
| Electric Riding Lawn Mower <ul style="list-style-type: none"> ■ Battery-electric riding lawn mower. ■ Mower must be charged within HomeWorks service territory. <p>Type of lawn mowing equipment being replaced or displaced:</p> <p><input type="checkbox"/> Gasoline walk-behind mower</p> <p><input type="checkbox"/> Gasoline riding mower</p> <p><input type="checkbox"/> Reel push mower (no engine)</p> <p><input type="checkbox"/> Electric corded walk-behind mower</p> <p><input type="checkbox"/> Electric cordless walk-behind mower</p> <p><input type="checkbox"/> No previous mower</p> <p><input type="checkbox"/> Other: _____</p> | <p>Brand:</p> <p>Model:</p> | Limit 1 | \$300 | \$ |
| Electric String Trimmer <ul style="list-style-type: none"> ■ Battery-electric cordless or corded. | <p>Brand:</p> <p>Model:</p> | | \$40 | \$ |
| Electric Leaf Blower <ul style="list-style-type: none"> ■ Battery-electric cordless or corded. | <p>Brand:</p> <p>Model:</p> | | \$40 | \$ |
| Electric Chainsaw <ul style="list-style-type: none"> ■ Battery-electric cordless or corded. | <p>Brand:</p> <p>Model:</p> | | \$40 | \$ |
| Total Incentives for Lawn: | | | | \$ |
| Total Amount Requested (Appliances, HVAC, Other & Lawn): | | | | \$ |

Submit your documents one of four ways:


Fax
 608.646.7682


Online
homeworks.org


Mail
 HomeWorks Energy Optimization
 431 Catalyst Way
 Madison, WI 53719


Email
info@michigan-energy.org



2023 Incentive Application

Application Terms & Conditions

APPLICATION: This application and any required additional documentation, including the invoice, must be filled out completely, truthfully, and accurately. Members are advised to retain a copy of this application and any accompanying documentation submitted to HomeWorks Tri-County Electric Co-op under this program. HomeWorks Tri-County Electric Co-op and its contractors will not be responsible for lost documentation pertaining to this application request. Details of this program, including incentive levels, are subject to change or cancellation without prior notice. This application with required documentation must be received within 60 days of installation or by December 31, 2023, whichever is earlier. Please visit www.homeworks.org for the most up-to-date details. Incentive amount cannot exceed purchase price.

LIMITED FUNDS: Funds for incentives are limited and available on a first-come, first-served basis. Incentive amounts are valid through December 31, 2023, unless revised. HomeWorks Tri-County Electric Co-op reserves the right to not pay this incentive if funds are not available at the time of application approval, or if the form is not filled out completely and accurately, including all required additional information, and submitted within the required time allowed. Incentive amount may not exceed purchase price.

ELIGIBILITY: This offer is valid for HomeWorks Tri-County Electric Co-op residential members applying through the Energy Optimization residential incentive program only. Members applying for an incentive must have an active electric account from HomeWorks Tri-County Electric Co-op. This offer is not valid for commercial properties. Equipment must be installed in the HomeWorks Tri-County Electric Co-op service territory in Michigan only. Eligible equipment can be found on Pages 3–6 of this application. Equipment must be new (not used) to be eligible for incentives, except where noted. Limit one incentive per eligible measure/unit or as noted in each measure section.

APPROVAL, VERIFICATION, AND INSPECTION: Prior to any payment of incentives, HomeWorks Tri-County Electric Co-op reserves the right to verify sales transactions. Members and/or their contractor will verify that the installed energy saving measures meet all applicable building codes, zoning laws, local, state, and federal requirements, and other relevant requirements. The member/contractor is responsible for any applicable permits as required by aforementioned code/law. Outdoor temperatures may affect this verification process. The member's home may also be selected for a quality control post-installation inspection by HomeWorks Tri-County Electric Co-op. No warranty is implied by this inspection.

PROOF OF PURCHASE: An invoice or receipt itemizing the purchased equipment must accompany each incentive application form. The receipt must indicate the equipment type, make, model, price, serial numbers, and the date of purchase. For measures requiring licensed contractor installation an invoice from the installing contractor detailing equipment installed must accompany each application.

PAYMENT: If project cost is less than standard incentive amount, incentive payment will be pro-rated to be paid in the amount of 100% of the cost. Once completed paperwork is submitted, incentive payments are usually mailed within six to eight weeks. Incentive payments are made by check. Payment processing may take longer if information is missing on the application. The member may authorize payment of the incentive directly to the contractor, if applicable. In this scenario, the credit MUST be clearly labeled as the Energy Optimization program incentive and be deducted from the amount due on the invoice.

TAX LIABILITY: HomeWorks Tri-County Electric Co-op will not be responsible for any tax liability that may be imposed on the member as a result of the payment of incentives. Please contact your tax advisor for more information.

NO ENDORSEMENT: HomeWorks Tri-County Electric Co-op does not endorse any particular manufacturer, product, system design, claim, or contractor in promoting this program.

INFORMATION RELEASE: The member agrees that HomeWorks Tri-County Electric Co-op may include their name, address, account number, services, and resulting energy savings ("Information") in a database hosted by a contractor of HomeWorks Tri-County Electric Co-op, and such Information may be included in reports or other documentation submitted to HomeWorks Tri-County Electric Co-op, and/or the Michigan Public Service Commission ("Reports"). HomeWorks Tri-County Electric Co-op will treat such Information as confidential and the Information in the Reports shall only be in the aggregate.

RELEASE/INDEMNIFICATION: Payment of incentives under the Energy Optimization Program and/or evaluation of applications for incentives shall not deem HomeWorks Tri-County Electric Co-op or any of its affiliates, employees, or agents ("Electric Cooperative Parties") to be responsible for any work completed in connection herewith. The applicant fully releases the Electric Cooperative Parties from any and all claims it may have against the Electric Cooperative Parties in connection with this application, the incentives, or the work performed in connection with them. In addition, the applicant agrees to defend, indemnify, and hold the Electric Cooperative Parties harmless from and against any and all claims, losses, demands, or lawsuits by any third parties arising in connection with this application, the payment or non-payment of incentives, or any work performed in connection with them.

DISCLAIMER: NEITHER HomeWorks Tri-County Electric Co-op NOR ANY OF ITS AFFILIATES GUARANTEES THE ENERGY SAVINGS OR MAKES ANY WARRANTIES ASSOCIATED WITH THE MEASURES ELIGIBLE FOR INCENTIVES UNDER THIS PROGRAM. HOMEWORKS TRI-COUNTY ELECTRIC CO-OP HAS NO OBLIGATIONS REGARDING, AND DOES NOT ENDORSE OR GUARANTEE ANY CLAIMS, PROMISES, WORK, OR EQUIPMENT MADE, PERFORMED, OR FURNISHED BY ANY CONTRACTOR OR EQUIPMENT VENDOR THAT SELLS OR INSTALLS ANY ENERGY EFFICIENCY MEASURES. HOMEWORKS TRI-COUNTY ELECTRIC CO-OP MAKES NO WARRANTIES OR REPRESENTATIONS OF ANY KIND, WHETHER STATUTORY, EXPRESS, OR IMPLIED, INCLUDING WITHOUT LIMITATIONS, WARRANTIES OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE REGARDING THE CENTRAL AIR CONDITIONING OR FURNACE EQUIPMENT PROVIDED BY A MANUFACTURER OR VENDOR. CONTACT YOUR CONTRACTOR FOR DETAILS REGARDING EQUIPMENT PERFORMANCE AND WARRANTIES. HOMEWORKS TRI-COUNTY ELECTRIC CO-OP HAS NO OBLIGATION TO MAKE ANY INCENTIVE DESCRIBED HEREIN UNLESS CERTAIN MINIMUM REQUIREMENTS OF THE PROGRAM HAVE BEEN MET AND FUNDS ALLOCATED FOR SUCH INCENTIVES ARE AVAILABLE FOR DISTRIBUTION.

PROPERTY RIGHTS: The member represents that they have the right to complete and/or install the energy-saving measures on the property on which those measures are completed and/or installed, and that any necessary landlord's consent has been obtained.

MEMBER'S CERTIFICATION: The member certifies that they have purchased and installed the equipment listed in this application at the defined location. The member agrees that all information is true.