

**Mt. Wheeler Power Member
Renewable Energy Generation**



Completely fill out each section. Incomplete forms will not be processed. Make a copy of this application for your records. Mail application and a copy of your itemized sales receipt no later than 120 days from date of final inspection:

Mt. Wheeler Power—Rebate Program, PO Box 151000, Ely, NV 89315.

Mt. Wheeler Power Account Number: _____

Name (on account): _____

Service Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone Number: _____

Email Address: _____ (Optional)

Fill In The Following Information For The Incentive Requested (Required):

Generation Source	Qualification/Rating	Per Watt Rebate
Wind Turbine	up to 10.00 Kw not to exceed \$2,000	\$2.00 _____
	10.5-30.00 Kw not to exceed \$3,000	\$1.50 _____
Solar	Residential customers up to 5Kw (5000 watts) (maximum rebate \$2,000)	\$2.00 _____
	Small commercial up to 20 Kw (20000 watts) (maximum rebate of \$3,000)	\$2.00 _____

Wind/ Solar	Manufacturer	Model #	KW Size	Date Purchased
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Installation of all solar or wind renewable energy generation systems are subject to verification. Please provide us with your installers information:

Installed by : _____ Date: _____

Please contact Mt. Wheeler Power to schedule an inspection after your system installation is complete.

Inspected by: _____ (MWP Employee Representative required) Date: _____

I hereby certify that I am a Mt. Wheeler Power member. I certify that all information on this form is accurate. I agree to all terms and conditions for participation in this program. I acknowledge that Mt. Wheeler Power will make the final determination of any incentive that I will receive and has the right to verify all the information provided. Policy 6.10 “Member Rebates For Energy Efficiency” is subject to change or cancel without notice, rebate funds are limited to an amount set forth by Mt. Wheeler Power Board of Directors. Please note: Only 1 incentive payment per member every 20 years. Mail completed application and copy of receipts to: **Mt. Wheeler Power—Rebate Program, PO Box 151000, Ely, NV 89315.**

Customer Signature: _____ Date: _____

