

# ILPGA 2021 PROPANE APPLIANCE REBATE PROGRAM APPLICATION

## **Customers may not submit this form directly**

Only propane marketers approved by the Illinois Propane Gas Association (ILPGA) may submit this application within 30 days after the safety inspection. Please complete the Dealer Participation Agreement (DPA) Form and email to [krichardson@ilpga.org](mailto:krichardson@ilpga.org)

**The safety inspection must be completed by the propane marketer.**

To apply for this rebate, type or print all required information, obtain the customer's signature and include all required documentation (invoice or receipt) dated not more than 6 months prior to the safety inspection date.

**Exception:** New Construction receipt or invoice dated not more than 12 months prior to the safety inspection date.

Scan and Email the original copy to [krichardson@ilpga.org](mailto:krichardson@ilpga.org) within 30 days of the safety inspection. Provide one copy to the customer and retain original copy for your records. Double-check your application for completeness; errors may delay or disqualify the application.

Submit the following with your application:

*(failure to submit any and / or all of the following will disqualify application)*

\_\_\_\_\_ Completed Application (make sure the customer signs it)

\_\_\_\_\_ Copy of paid invoice for appliance purchased *(or signed work order noting the appliance make, model & serial number)*

\_\_\_\_\_ Manufactured Home will require a copy of the "Spec" sheet and paid invoice showing the propane appliance(s)

**If the safety inspection is to be completed at any time in the month of December; all applications MUST BE emailed to [krichardson@ilpga.org](mailto:krichardson@ilpga.org) on or before December 31, 2021 to qualify for 2021 funding.**

**Example: New propane appliance was installed on December 15<sup>th</sup>, the safety inspection was completed on December 30<sup>th</sup>, the application must be emailed or postmarked on or before December 31, 2021 to qualify for 2021 funds.**

**Any safety inspection that cannot be completed and at the IPGA office by December 31, 2021; it should be held over for the 2022 program.**

# ILPGA 2021 PROPANE APPLIANCE REBATE PROGRAM APPLICATION

PROPANE APPLIANCE INFORMATION: \_\_\_\_\_ \$200 Furnace \_\_\_\_\_ \$200 Boiler  
\_\_\_\_\_ \$100 Direct Vent Fireplace \_\_\_\_\_ \$100 Direct Vent Garage / Shop Heater

NEW: \_\_\_\_\_ New Construction \_\_\_\_\_ New Manufactured Home

REPLACEMENT TYPE: \_\_\_\_\_ Electric Replacement \_\_\_\_\_ Fuel Oil Replacement  
\_\_\_\_\_ Natural Gas Replacement \_\_\_\_\_ Wood Burner Replacement \_\_\_\_\_ Geothermal Replacement  
\_\_\_\_\_ Coal Burner Replacement \_\_\_\_\_ Propane to Propane

Furnace / Boiler Brand: \_\_\_\_\_ Serial #: \_\_\_\_\_ Install Date: \_\_\_\_\_

Fireplace Brand: \_\_\_\_\_ Serial #: \_\_\_\_\_ Install Date: \_\_\_\_\_

Garage / Shop Brand: \_\_\_\_\_ Serial #: \_\_\_\_\_ Install Date: \_\_\_\_\_

## APPLICANT INFORMATION *(This is where the check will be mailed to)*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Installation address if different from above: \_\_\_\_\_

*I hereby agree not to modify the equipment for a period of five years from the date of installation in a way that would materially impair the equipment's performance with respect to energy conservation, efficiency or air quality.*

*I consent to on-site examination of the above installation by an employee, inspector or agent for ILPGA for the purpose of verifying compliance of the installation with program and safety rules. I have received a copy of the program rules and understand that this rebate is available only through authorized propane dealers in Illinois, that this is not a government program and that the program may end at any time*

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## PROPANE COMPANY INFORMATION

Company: \_\_\_\_\_ Phone: \_\_\_\_\_

Safety Inspector's Name: (PLEASE PRINT) \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*I have inspected the equipment and performed a safety inspection (per definition) at the address listed. In accordance with the standards set forth by the NFPA, all relevant state & local regulation and manufacture instructions. As a result of that inspection, I have determined that the equipment meets all those standards and regulations.*

Inspectors Signature: \_\_\_\_\_ Date: \_\_\_\_\_