

Rebates will be issued only for NEW appliances. Rebates will be paid until funds are depleted. Submit this completed form with the required documentation to the Ohio Propane Council (OPC) at the address at the bottom of page 2. To apply for this rebate:

Internal Use Only:

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1. Complete this application in its entirety (2 pages). **Please PRINT clearly.**
2. Include a copy of the paid receipt or invoice (must be purchased January 1, 2023 - December 31, 2023.) Must include information on the company installing the appliance. For appliances purchased *before* October 1, 2023, rebates will not be issued after December 31, 2023. For appliances purchased *on/after* October 1, 2023, rebates will not be issued after March 31, 2024.

1. APPLIANCE INFORMATION

KEY

★ **Other Fuel Source to Propane**
 Replacing electric, Fuel Oil or Natural Gas appliance with propane

■ **New Construction**
 No existing water heater/boiler.

● **Propane to Propane**
 Upgrading existing propane appliance to new propane appliance (Only homeowner receives check)

- ★ **Propane Water Heater** (replaced electric) **\$300**
- ★ **Propane Water Heater** (replaced natural gas) **\$300**
- **Propane Water Heater** (new construction) **\$300**
- **Propane Water Heater** (replaced propane) **\$150**
- ★ **Propane Furnace** (replaced electric) **\$400**
- ★ **Propane Furnace** (replaced natural gas) **\$400**
- **Propane Furnace** (new construction) **\$400**
- **Propane Furnace** (replaced propane) **\$200**

Reason for install: New Construction Upgrade Malfunctioning Unit

Rebate recipient type: Builder Homeowner Installer

Type of home: Site-Built Home Manufactured Home

Note: All combined/dual fuel furnaces and combined dual fuel water heaters are excluded from participation in the rebate program.

IBC Technologies 123456789

Appliance Brand Serial No.

2. CONSUMER/APPLICANT INFORMATION (where rebate will be mailed)

Homeowner Name

Name

Homeowner Street Address **Homeowner City** **OH** **Homeowner Zip**

Address (where rebate will be mailed) City State Zip

Homeowner Phone Number **Homeowner Email - We will use email to reach out if any issues with with App**

Phone Email

Propane Supplier of home that appliance was installed in

Propane Company

How did you learn about the rebate: Social Media Website My Propane Retailer My Builder Other Fill out if Applicable

Note: Checks not cashed within 90 days will expire and will not be reissued. Allow 4-6 weeks for rebate checks to be processed.

3. LICENSED INSTALLER INFORMATION (if applicable)

Licensed Installer Name **Installer Licensed Required** **Licensed Installer Company Name**

Name License # Company

Licensed Installer Street Address **Licensed Installer City** **OH** **Licensed Installer Zip**

Address City State Zip

Licensed Installer Phone Number **Licensed Installer Email**

Phone Email



4. PROPANE SAFETY INSPECTION INFORMATION

A Safety inspection accompanying the installation of the qualifying appliance(s) must include one or more of the following 1) a leak test; 2) a pressure test if required by applicable laws, rules and regulations, and/or 3) a flow and lock up test on the regulator(s). The Safety inspection must be performed prior to the submission of any rebate application. The purpose of the Safety inspection is to support the OPC Rebate Program rules and requirements that a safety inspection did occur as required under the rebate program rules and regulations. Licensed contractors **can** perform safety inspections. **DO NOT INCLUDE THE SAFETY INSPECTION REPORT WITH THIS APPLICATION.**

Safety leak check was performed:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Date	Date Installed	Technician Name	Safety Inspector
Pressure test was performed:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Date	Date Installed		
Flow & lock-up test was performed:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Date	Date Installed		

Performed by licensed installer Performed by propane company

Licensed installer company name or propane company name (who performed the safety inspection)

Safety Inspection Company

Safety Inspector Street Address	Safety Inspector City	OH	Safety Inspector Zip
Address	City	State	Zip
Safety Inspector Phone Number	Safety Inspector Email		
Phone	Email		

I certify that this propane appliance was purchased for installation at the above address. I am aware that a receipt of purchase is required at the time of submission of the rebate form in order for the rebate to be accepted for review. I am further aware that no check will be issued until all program requirements have been met and the rebate has been approved. I understand, and have complied with all laws, rules and regulations governing the installation of the qualifying appliance(s) and with the manufacturer's installation instructions. The Ohio Propane Council assumes no responsibility whatsoever for the installation, inspection or testing of the qualifying appliance or any associated gas system and, by issuing a rebate, makes no representation, warranty or guarantee regarding the qualifying appliance or the associated gas system. The OPC disclaims any liability for personal injury, property damage, business losses or other damages of any nature whatsoever, whether special, indirect, consequential or compensatory, directly or indirectly arising from the installation of the qualifying appliance. All rebates are subject to availability. This is a limited offer and all requests will be processed on a first come, first served basis. The OPC has first rights on interpretation of all terms and conditions pertaining to this offer.

Required Customer Signature Date customer signed

Customer Signature Date

Required Safety Inspector Signature Date Safety Inspector signed

Safety Inspector Signature Date

By signing above you agree you have with all laws, rules, and regulations governing the installation of the qualifying appliance(s) and with the manufacturer's installation instructions. If you disagree, please share your explanation on a separate sheet of paper.

- Checklist of Items to Include:
- Applicant Info
 - Licensed Installer Info
 - Receipt of Purchase
 - New line documentation, if applicable

Application must be postmarked, emailed or faxed by December 31, 2023, 11:59pm EST
 Return to: Ohio Propane Council • 605 N. High Street, #214 • Columbus, OH 43215
 opga@kdafirm.com • Fax 517.485.9408 • Questions? Call 937.203.2322