

2025 PROPANE FURNACE SAFE INSTALLATION REBATE APPLICATION

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Rebates will be paid until funds are depleted. Submit form with the required documentation to the address at the bottom of page 2. To apply for this rebate: 1. Complete this entire application (2 pages). Incomplete applications will not be processed. PRINT clearly. 2. Include a copy of the paid in full receipt or invoice

Internal Use Only: 🗆 et 🗖 DD 🗖 ED

(must be purchased January 1, 2025 - December 31, 2025.) Must include information on the company installing the appliance. For appliances purchased before November 1, 2025, rebates will not be issued after December 31, 2025. For appliances purchased on/after November 1, 2025, rebates will not be issued after January 31, 2026. 3. Submit proof of new propane line trenched or new tank set when switching to propane. Proof should be propane company work order or invoice.

Eligibility: Rebates will be issued only for NEW appliances. To be eligible, a furnace must be at least 36,000 btu. Boilers are considered a furnace. Only furnaces for heating the whole home are eligible. Furnaces for commercial buildings, barns, garages, pool houses, sheds, etc. are not eligible for this rebate.



1. SUPPORTING DOCUMENTS

Checklist of Items to Include:

Application Completed in Entirety

Receipt of Purchase, paid in full

Y Propane Company Work Order (not required for propane to propane)

Rebate application will be denied if any of the above items are missing.

2. APPLIANCE INFO		Other Fuel Sour Replacing electric, F Natural Gas, or Woo appliance with property	Fuel Oil, od Buring	New Construct No existing Furna		Propane to Propane Upgrading existing propane appliance to new propane appliance (Only homeowner receives check)	
 Propane Furnace (replaced electri	c) \$400	🛗 Propan	e Furnace (r	eplaced natura	l gas) \$400	ı.	
 Propane Furnace (replaced fuel oi	Propane Furnace (new construction) \$400						
Propane Furnace (replaced propa	ne) \$200	管 Propan	e Furnace (r	eplaced wood	burning) \$2	00	
Reason for install:	□ New Construction	n 🗖 Upgra	ıde	🗆 Mal	functioning	Unit	
Rebate recipient type:	□ Builder	□ Home	□ Homeowner □		□ Installer		
Type of home:	□ Site-Built Home	uilt Home 🛛 Manufactured Home					
Note: All combined/dual fuel furnaces and com	bined dual fuel water heater	s are excluded from p	articipation in th	e rebate program.			
IBC Technologies	12345	6789					
Appliance Brand	Serial	No.					
A. CONSUMER/APPI (where rebate will be mailed) Homeowner Name Name	ICANT INFORM	IATION					
Homeowner Street Address		Homeowner C	ity		OH	Homeowner Zip	
Address (where rebate will be mailed	d)	City		State	Zip		
Homeowner Phone Number		Homed	wner Emai	I - We will use e	mail to reach	out if any issues with with App	
Phone		Email					
Propane Supplier of home that a	opliance was installe	ed in (Required	1)				
Propane Company							
How did you learn about the rebate:	I Online D My Ins	staller/Builder	🗆 My Propa	ane Retailer	□ Other_	Fill out if Applicable	
Note: Checks not cashed within 90 days v documentation is received , for rebate che	cks to be processed.	reissued. Allow 6-8			ation and all	supporting	

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LICENSED INSTALLER INFORMATION

Licensed Installer Name	Installer Licensed Required	Licensed Installer Co	mpany	Name
Name	License #	Company		
Licensed Installer Street Address	Licensed Installer City		OH L	icensed Installer Zip
Address	City		State	Zip
Licensed Installer Phone Number	Licensed	Installer Email		
Phone	Email			
5. PROPANE SAFETY IN:	SPECTION INFORMATION	Licensed Installer can fill out Section At least one safety	5 and	
A Safety inspection accompanying the installation if required by applicable laws, rules and regulation to the submission of any rebate application. The safety inspection did occur as required under the staller is not licensed by the state of Ohio, then the	ons, and/or 3) a flow and lock up test on purpose of the Safety inspection is to su rebate program rules and regulations. L	the regulator(s). The Safety inspe pport the OPC Rebate Program i icensed contractors can perform	ection mi rules and n safety i	ust be performed prior I requirements that a
Safety leak check was performed:	□ No Date Date Insta	alled Technician Name	Safety	y Inspector
Pressure test was performed: Yes	□ No Date Date Insta	alled		
Flow & lock-up test was performed:	□ No Date Date Insta	alled		
Performed by licensed installer	□ Performed by propane com	bany		
Licensed installer company name or pr Safety Inspection Company	opane company name (who per	formed the safety inspect	ion)	
Safety Inspector Street Address	Safety Inspector (City	ОН	Safety Inspector Zip
Address	City		State	Zip
Safety Inspector Phone Number	Safety Ins	pector Email		
Phone	Email			
Thone	Lindi			
I certify that this propane appliance was purchas submission of the rebate form in order for the rebate have been met and the rebate has been approv	ate to be accepted for review. I am further	aware that no check will be issu	ied until d	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	Date customer signed
Customer Signature	Date
Required	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.

Return to: Ohio Propane Council Rebate Processing • 629 W. Hillsdale St., Lansing, MI 48933 opga@kdafirm.com • Fax 517.485.9408 • Questions? Call 937.203.2322