



Bayfield Electric Cooperative

Your Touchstone Energy® Cooperative 



EV CHARGERS

2025 Energy Efficiency Incentive Form

This institution is an equal opportunity provider.

ELIGIBILITY CRITERIA

- ❖ New EV charger must be installed on cooperative's lines.
- ❖ Incentive not to exceed the EV charger cost.
- ❖ Incentives are in place through December 31, 2025. Funds are limited so submit required documentation as soon as possible.
- ❖ Required documentation must be submitted within 3 months of EV charger install date.
- ❖ Additional eligibility criteria may apply. Program is subject to change or cancellation without notice. Contact cooperative for details.
- ❖ **Required documentation** listed below must be submitted no later than 3 months after EV charger install date.
 - ✓ This incentive form
 - ✓ A copy of your receipt or invoice for each item with purchase price(s) circled
 - ✓ For EV charger, include documentation showing the station has been installed

Submit required documentation to: **Bayfield Electric Cooperative**
PO Box 68, Iron River WI 54847

MEMBER INFORMATION *(Please fill out entire section)*

Member Name			Email		
Address			Account		Phone
			Date		Member Signature
City	State	Zip	Incentive for: <input type="checkbox"/> Residential <input type="checkbox"/> Farm <input type="checkbox"/> Commercial <input type="checkbox"/> Industrial <input type="checkbox"/> Institution/Government <input type="checkbox"/> Other:		

Email addresses will be used for cooperative communication only.

INCENTIVE INFORMATION *(Please fill in gray shaded boxes for requested incentives)*

Equipment	Specifications	Equipment Cost	Quantity	Incentive	Total Quantity x Incentive
Electric Vehicle Charging Station	Must be on load control as defined by cooperative			\$400	
Smart Electric Vehicle Charging Station with integrated metering	Must be on load control as defined by cooperative			\$800	
Total Incentive Amount Requested:					

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved - Reason:	Total Incentive Issued: \$
Cooperative Representative:	Date: