



Your Touchstone Energy® Cooperative 

ElectricSense®

WATER HEATERS

2026 Energy Efficiency Incentive Form

This institution is an equal opportunity provider.

ELIGIBILITY CRITERIA

- ❖ New equipment must be installed on cooperative's lines.
- ❖ Incentive not to exceed the equipment cost.
- ❖ Incentives are in place through December 31, 2026. Funds are limited so submit required documentation as soon as possible.
- ❖ Required documentation must be submitted within 3 months of 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 install date.
 - ✓ This incentive form
 - ✓ A copy of your receipt or invoice for each item with purchase price(s) and purchase/install date circled
 - ✓ Documentation showing the equipment 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 *Email addresses will be used for cooperative communication only.		
Address		Account	Phone
City	State	Zip	Date
Member Signature			

Incentive for: Residential Farm Commercial Industrial Institution/Government Other:

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

Equipment	Specifications	Equipment Cost	Quantity	Incentive	Total Quantity x Incentive
Residential High Efficiency Water Heater	75-99 gallons Uniform Energy Factor $\geq .88$ Must be on load control as defined by cooperative			\$250	
Residential High Efficiency Water Heater	100+ gallons Uniform Energy Factor $\geq .88$ Must be on load control as defined by cooperative			\$400	
Commercial Water Heater	75-99 gallons Must be on load control as defined by cooperative			\$250	
Commercial Water Heater	100+ gallons Must be on load control as defined by cooperative			\$400	
Heat Pump Water Heater	Integrated (all-in-one) units Uniform Energy Factor ≥ 2.20			\$500	

Total Incentive Amount Requested:

OFFICE USE ONLY

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