

## **2024 Induction Cooktop Rebate Application**

Please contact us if you have any questions: rebates@lpea.coop or (970) 247-5786

Member Name (as it appears on your bill)		LPEA Account #		
Preferred Name (if different)				
Physical Address	City	State	Zip	
Mailing Address (if different)_	City_	State	Zip	_
Phone Number	Email			
How did you hear about our pr	ogram?			
FlyerNewsletter	LPEA Website	Social Media	Friends/Family	Retailer
Local Organization		Contractor		
To apply for an Induction Cook Completed and signed app Receipt / Proof of Purchas If gas-to-electric conversio Completed W-9 (Name or Product Manufacturer	olication e on, you must provide a ph n W-9 must match name o	oto of old gas cook on rebate check)	top.	
Model Number				
Replacement Type:  New C Date Installed:	onstruction Gas-to-I			
Signed		Da	te	