



REPLACEMENT WINDOWS AND DOORS - IOWA 2012 REBATE CLAIM FORM

INSTRUCTIONS: Fill out form completely and sign. Attach supporting documentation: receipt(s) and NFRC sticker(s). Failure to complete the form and provide documentation could result in claim being sent back or denied.

Alliant Energy is the trade name of Interstate Power and Light Company (IPL). The utility providing the rebates is Interstate Power and Light Company (IPL), an Alliant Energy company, hereinafter referred to as Alliant Energy.

Questions about the forms or need assistance with the forms? Call our Energy Efficiency Hotline at 1-866-ALLIANT (1-866-255-4268).

CUSTOMER INFORMATION			
Person or Company Receiving Rebate		Mailing Address (if different than installation address)	
Installation Address		City	State
City		State	Zip
Alliant Energy Account No. at Installation Address (if available)		Primary Contact Person for Claims Questions	
Residential Building Type		Year House/Facility Built (required)	Phone No.
<input type="checkbox"/> Single-Family/Duplex <input type="checkbox"/> Manufactured Home <input type="checkbox"/> Apt./Condo (3+ Units)		()	()
Non-Residential Building Type (check only one)			
<input type="checkbox"/> Type #1 Convenience Store Grocery Restaurant		<input type="checkbox"/> Type #2 Apt./Condo (3+ Units) Hospital Lodging	<input type="checkbox"/> Type #3 Church Health Clinic Warehouse Other Commercial
<input type="checkbox"/> Type #4 Education Office Retail		<input type="checkbox"/> Type #5 Industrial	<input type="checkbox"/> Type #6 Agriculture Farm Building
Tax Status			
<input type="checkbox"/> Residential <input type="checkbox"/> Sole-Proprietor* <input type="checkbox"/> Partnership* <input type="checkbox"/> Government <input type="checkbox"/> Non-Profit <input type="checkbox"/> Corporation <input type="checkbox"/> Religious			
*If sole-proprietor or partnership, you must provide a copy of your W-9 showing the Social Security or Federal Tax ID number and the associated legal name listed on the document. To comply with IRS regulations, you must provide a copy of your W-9 each time you submit a claim.			

BUILDING INFORMATION	
Primary Heating Equipment <input type="checkbox"/> Natural Gas Furnace <input type="checkbox"/> Natural Gas Boiler <input type="checkbox"/> Electric Resistance <input type="checkbox"/> Geothermal <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Other	Primary Cooling Equipment <input type="checkbox"/> Geothermal <input type="checkbox"/> Air-Source Heat Pump <input type="checkbox"/> Central Air Conditioning <input type="checkbox"/> Room Air Conditioning <input type="checkbox"/> None

WINDOW INFORMATION						
Complete for each window style or type. Rebate (per window) = \$25. One opening = one window. Must meet the U-factor requirement of 0.30 or less. Include verification of U-factor with claim form. Minimum of 8 square feet per window. Square footage = (length in inches x width in inches)/144.						
Manufacturer	Type (double-hung, single-hung, casement, picture, etc.)	No. Installed	U-Factor (required)	Width (Inches)	Length (Inches)	Square Footage (Width x Length)/144
Project Completion Date: _____		Rebate: Total number of windows installed _____ x \$25 = \$ _____				

DOOR INFORMATION						
Complete for each door. Maximum of 5 doors per residential building and 10 doors per non-residential building. Minimum of 8 square feet per door. Square footage = (length in inches x width in inches)/144. Must meet the following U-factor requirements: Include proof of U-factor with this form. Solid Door 0.20 to 0.11 U-Factor = \$25 Solid Door ≤ 0.10 U-Factor = \$50 Glass Door 50% glass (or more) U-Factor 0.30 or less = \$25						
Manufacturer	Solid or Glass Door	U-Factor (required)	Width (Inches)	Length (Inches)	Square Footage (Width x Length)/144	Rebate
						\$
						\$
						\$
Project Completion Date: _____					Rebate Total	\$

REMEMBER TO SIGN THE NEXT PAGE

Additional information continued

SPECIFIC TERMS AND CONDITIONS

- A. Rebate amount is limited to 50 percent of equipment cost minus any manufacturer or dealer rebates.
- B. Must be installed in a conditioned space where Alliant Energy supplies the primary heating or cooling energy source.
- C. New windows must be replacing existing windows in a conditioned living space.
- D. Storm doors do not qualify for rebates.
- E. Sashes installed without new windows do not qualify for rebates.

GENERAL TERMS AND CONDITIONS

IMPORTANT: Before completing and signing the form, please read the General Terms and Conditions located in the rebate booklets, or at alliantenergy.com/terms.

RISK OF LOSS, INDEMNITY AND DISCLAIMER

WHEREAS, while Alliant Energy may have entered into a Dealer Participation Agreement with Dealer on the reverse side of this document, any transaction for the purchase and/ or installation of equipment pursuant to this rebate claim is between the Participating Dealer and the Customer identified on the reverse side of this document. As a signatory to this document, you understand that Alliant Energy is not a party to such transaction and neither the Participating Dealer nor the Customer shall have any recourse to Alliant Energy related to such transaction.

NOW, THEREFORE, for good and valuable consideration, which is hereby acknowledged, by your signature you agree as follows:

1. **RISK OF LOSS; INDEMNITY.** Customer and Dealer hereby agree to assume all risk of loss associated with the equipment and to defend, indemnify and hold harmless Alliant Energy, its agents, officers, directors, employees and assigns, and to release same from any and all liabilities, claims, demands, actions and causes of action whatsoever arising out of or related to any loss, damage or injury, including death, injury to persons or property, that may be sustained by Customer, Dealer or a third party in connection with the installation, use or possession of the equipment or performance of the services, or relating in any way to the Dealer Participation Agreement or any rebate claim.
2. **DISCLAIMER.** Customer acknowledges, warrants and agrees that the services, materials and equipment have been provided by a third party, are suitable for its purposes and meet the criteria for a rebate hereunder. Any warranty on the equipment or services shall be provided through the equipment manufacturer or supplier or service provider. *Customer specifically acknowledges that Alliant Energy makes no representations or warranties of any kind, express or implied, as to the merchantability, fitness for a particular purpose, design or condition of the equipment or services.* The sum total liability of Alliant Energy to Customer and Dealer with respect to any claim or liability arising out of or related to this rebate claim, whether in contract, tort (including negligence), or other legal theory shall not exceed the amount of the rebate. Alliant Energy shall not in any event be liable for special, indirect, incidental or consequential damages, including but not limited to, loss of profits or revenue, loss of use of site systems or property, lack of savings, cost of capital, or claims by Customer or Dealer for damage to property or injury to persons including any third party.
3. Customer and Dealer further acknowledge that Alliant Energy will not provide insurance coverage for the Customer or Dealer, and that it is the Customer and Dealer's responsibility to procure insurance coverage against any hazards relating to the equipment to protect persons and property.

CUSTOMER SIGNATURE AND CERTIFICATION

I certify that I have purchased the equipment described in this form and that it has been installed at the service address indicated. I agree to the terms and conditions associated with this form.

Customer installed equipment

Dealer installed equipment (Dealer/Contractor must fill out Dealer Contractor or Store box below)

Customer Signature

Date

Do you want to help local families in need and donate your rebate to Alliant Energy's *Hometown Care Energy Fund*? Yes No

FOR DEALER, CONTRACTOR OR STORE ONLY

Dealer/Contractor/Store Name

Dealer ID (if applicable)

Phone No.

Address

City

State

ZIP

I certify that all equipment and installation information provided on this application is correct and accurate.

Dealer/Contractor Signature: _____ Date: _____

Before you turn in your form:

- Fill out the form completely.
- Attach a copy of the sales receipt or invoice. Circle the energy-efficient equipment on the receipt.
- Include documentation listed in the instructions.
- Sign the customer Signature and Certification section. If a dealer installed the equipment, the dealer must sign the Dealer, Contractor or Store section.
- We recommend that you mail the completed form(s), receipt(s), and required documentation within 90 days of installation.

Mail completed forms to:

ENERGY EFFICIENCY PROGRAMS
Alliant Energy
P.O. Box 351
Cedar Rapids, IA 52406-0351

FAX: (319) 786-4746

Please choose one option.
To avoid delays, do not fax and mail your form.

Please allow six to eight weeks for your rebate on a prepaid Visa[®] card, after Alliant Energy receives your properly completed rebate claim form, receipts and any other required materials.

Questions? Call 1-866-ALLIANT (1-866-255-4268) or visit us online at alliantenergy.com.