

Air Source Heat Pump

Directions: Submit the completed rebate form with all required documentation. Rebate claims must be received within 90 days of purchase or installation to Idaho County Light & Power Coop., PO Box 300, Grangeville, ID 83530 or e-mail: rholman@iclp.coop.

TO QUALIFY:

- NEW CONSTRUCTION, EXISTING HOMES, and MANUFACTURED HOMES
- HEAT PUMP UPGRADE
 - O REPLACING AN EXISTING HEAT PUMP;
 - O INSTALLING AN AIR SOURCE HEAR PUMP IN AN EXISTING SINGLE FAMILY OR EXISTING MANUFACTURED HOM WITHOUT ANY PREVIOUSLY EXISTING PRIMARY HEATING SYSTEM
 - O ADDING A HEAT PUMP TO A NONELECTRIC HEATING SYSTEM (I.E., GAS, OIL PROPANE, WOOD)
 - O UPGRADING FROM ZONAL (INCLUDING ZONAL HYDRONIC SYSTEMS THAT DO NOT UTILIZE A DUCT SYSTEM FOR DISTRIBUTION) TO AIR SOURCE HEAT PUMP
 - O REPLACING A DUCTLESS MINI-SPLIT HEAT PUMP
 - O REPLACING A PTCS AIR SOURCE HEAR PUMP THAT IS NO LONGER FUNCTIONING WITH A NEW PTCS CERTIFIED HEAT PUMP
- HEAT PUMP CONVERSION
 - CONVERTING AN ELECTRIC FORCED-AIR FURNACE TO A HIGH-EFFICIENCY HEAT PUMP;
- MINIMUM RATINGS: HSPF2 of 7.5 AND SEER2 of 14.3
- ASHP are subject to quality assurance inspection by a BPA-approved quality assurance inspector

HEAT PUMP REBATE

Heat Pump Conversion, Air Source - \$1000

Heat Pump Upgrade, Variable Speed - \$200 Heat Pump Conversion, Variable Speed - \$1200

Required Documentation: (Heat Pump must be installed by a PTCS certified contractor)

- Handwritten Air Source Heat Pump Form (Completed by Technician).
- Equipment/Contractor Invoice with Model Numbers, Order or purchase date and Installed Cost
- AHRI Certificate

PTCS AIR SOURCE HEAT PUMP FORM

PTCS AIR SOURCE HEAT PUMP INSTALLATION SPECIFICATION

Applicant and Site Information (complete all sections)

| Name | Account | Number | | Phone | |
|---|---|---|----------------------------|---|--|
| Service Address | City | | State_ | Zip | |
| Mailing Address | City | | State | Zip | |
| E-Mail Address | Purchase/Installation Date | | | | |
| I certify that the above items were purchased and installed at representative to verify installation and/or operation at their items were installed in compliance with aplicable codes. ICL8 installation and/or operation of the said items. I also underst that I will receive. ICL&P rebate programs are subject to char | discretion. I ukP disclaims ar and that ICL& | nderstand that ind is free from all will make the f | t is my re I liablility | esponsibility to ensure the arising from the | |
| Applicant Signature | | Date | Date | | |
| ICL&P Use Only: approved by | | Date | e | | |
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