

WECI HVAC Rebate Program - Member Authorization Form

Pursuant to the Privacy and Confidentiality Policy adopted by Wheatland Electric Cooperative, Inc. (WECI), records about a member may be disclosed at the request of or with the permission of the member.

By submitting this form, I, as a member of WECI, do hereby request, agree and authorize WECI to release account information to, and authorize WECI to process and accept the HVAC Rebate Program Application submitted on my behalf, from the authorized person listed on this Member Authorization Form.

Member Information

Member Name: _____

WECI Account No: _____

Service Address: _____ City: _____

Home Phone #: () _____

Authorized Person Information

Name: _____

Company Name: _____

Mailing Address: _____

Phone #: (): _____

E-mail Address: _____

I hereby release and discharge WECI, its directors, officers and employees, from all claims and liabilities which WECI may otherwise incur as a result of the release of information hereunder or processing or acceptance of such HVAC Rebate Program Application.

This authorization as to the HVAC Rebate Program Application shall remain in effect until I revoke it by submitting a written cancellation/revocation to WECI.

Signature of Member (required)

Date (required)

Please provide this completed and signed form to your HVAC Contractor for submission with the HVAC Rebate Application.