

## RESIDENTIAL REBATE PROGRAM NEW ELECTRIC VEHICLE PURCHASE

MEMBER INFOR	RMATION
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As Shown on Wheatland Bill			Submit this signed application along with Dated Purchase Invoice
First Name:	Last Name:		Mail to: Wheatland Electric
Account Number:	Phone Number:		PO Box 230 101 S. Main St.
Email:			Scott City, KS 67871
Mailing Address:			Email to: rebates@weci.net
City:	State:	Zip:	-Rebate Amount- Battery Electric Vehicle \$250
Primary Charging Location			Plug-In Hybrid Electric Vehicle
Personal Residence Landlord F	lenter 🗌 Other		\$150
Address:			Other conditions apply. Refer to Program Manual for details.
City:	State:	Zip:	Incomplete rebate forms will not be accepted. Application must be within 60 days of purchase.

Battery Electric Vehicle (BEV)	Plug-In Hybrid Electric Vehicle (PHEV)	Date of Purchase:
Vehicle Make:	Vehicle Model:	
Charger Type:	VIN:	

## ACKNOWLEDGEMENT —

By signing this form, the Member affirms that the information reflected here is accurate to the best of his or her knowledge and that the falsification or reporting of incorrect information on this form is grounds for denial of rebate.

Member Signature \_\_