



# RECYCLING

## 2026 Energy Efficiency Rebate Form

### ELIGIBILITY AND INSTRUCTIONS FOR COMPLETING THIS FORM *(Please read)*

- ❖ Recycled appliances must have been removed from Polk-Burnett lines and recycled in 2026.
- ❖ Rebates are in place through December 31, 2026, or until funds are depleted. Program subject to change without notice.
  - ✓ This rebate form - submit within 3 months of recycling or January 1, 2027 whichever comes first
  - ✓ Receipt showing appliance was taken to a recycling center or picked up for recycling.

#### Submit required documentation to:

**Polk Burnett 1001 State Road 35 Centuria, WI 54824 Fax: 715-646-2404 Phone: 800-421-0283 · 715-646-2191 ext. 595**

### MEMBER INFORMATION *(Please fill out entire section - be sure to provide account and location # found in the upper right-hand corner of your electric bill)*

Example:

Location Address: Location #: Invoice Date: Account #:

Member Name			Email	Phone #
Mailing Address			Account #	Location # Example: (02A-11-021)
City	State	Zip Code	Date	Office Use Only

Rebate for: ☐ Residential ☐ Seasonal "Cabin" ☐ Farm ☐ Commercial/Industrial ☐ Institution/Government

### REBATE INFORMATION *(Please fill in shaded boxes for all items for which you are requesting a rebate)*

Equipment	Specifications <i>Limit (3) rebates of each appliance listed per account</i>	Quantity	Rebate	Total: Quantity x Rebate
Recycling – Freezer	Refrigerator, freezer, or room/window air conditioner must be in working order at the time of recycling.		\$25	
Recycling – Refrigerator	Refrigerator, freezer, or room/window air conditioner must be removed from service and fully disposed of following federal, state, and local laws. (Menard's is currently not eligible)		\$25	
Recycling – Room Air Conditioner			\$25	

I attest that the product I am having recycled was in working condition at time of recycling: (member signature)

Rebate(s) will be paid as a one-time billing credit 1-3 billing cycles after approval.	Total Rebate Requested:	
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**To be filled out by person Picking up or Accepting product to be recycled:** (unless taken to Polk County Recycling on Hwy 8 St. Croix Falls or Gone Green Recycling south of Frederic on Hwy 35)

By signing the following:

I certify that either I am a licensed recycler or that this appliance will be turned over to a licensed recycler and that the appliance(s):

- Was/were in working order when received
- Will be removed from the grid (not resold or reused)
- Will be fully decommissioned including refrigeration, mercury components, refrigerants, and CFCs recycled following federal, state, and local laws
- I further attest the following information is accurate and that this appliance was turned in by the resident listed on this rebate form.

Name of person receiving appliance for recycling: \_\_\_\_\_

Business Name & Phone Number: \_\_\_\_\_

Signature of person picking up or receiving this appliance \_\_\_\_\_

### OFFICE USE ONLY

☐ Approved ☐ Not approved – Reason:

Cooperative Representative:	Date:	Total rebate issued: \$
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