



A Touchstone Energy® Cooperative 
This institution is an equal opportunity provider.



ENERGY AUDIT – COST OF AUDIT

2026 Energy Efficiency Incentive Form

ELIGIBILITY CRITERIA

- ❖ Home or farm receiving energy audit must be on cooperative's lines.
- ❖ Incentive not to exceed 50% of the cost of energy audit, up to \$200.
- ❖ Energy audit must be performed by a certified Home Performance Auditor, certified Energy Manager, or a cooperative-approved partner.
- ❖ The audit must be a comprehensive audit, including a written report.
- ❖ The audit report must indicate the improvement(s) will result in electrical or delivered fossil fuels (LP, fuel oil) reduction or efficiency.
- ❖ Each member account qualifies for only 1 Energy Audit – Cost of Audit incentive every 5 years, regardless of the number of audits performed.
- ❖ Incentives are in place through December 31, 2026. Funds are limited so submit required documentation as soon as possible.
- ❖ Required documentation must be submitted within 3 months of audit completion, or report date if there is a significant delay in the report.
- ❖ Additional eligibility criteria may apply. Program is subject to change or cancellation without notice. Contact cooperative for details.
- ❖ Required documentation listed below must be submitted no later than 3 months after audit completion
 - ✓ This incentive form
 - ✓ A copy of invoice for Energy Audit with audit cost and completion date circled
 - ✓ Copy of the audit documentation/report

Submit required documentation to: Allamakee-Clayton Electric Cooperative

PO Box 715

Postville, IA 52162-0715 | email: rwagner@acrec.coop

MEMBER INFORMATION (Please fill out entire section)

Member Name		Email <small>Email addresses will be used for cooperative communication only.</small>		
Address		Account	Phone	
City	State	Zip	Date	Member Signature

Incentive for: Home Farm

AUDIT INFORMATION (Please fill out entire section)

Date of Service:	Service Performed by: <input type="checkbox"/> Home Auditor <input type="checkbox"/> Certified Energy Manager	
Service Provider Name:	Service Provider Phone:	Service Provider Email:
Water Heater Fuel Type: <input type="checkbox"/> Electric <input type="checkbox"/> LP <input type="checkbox"/> Other:	Home Heating Fuel Type: <input type="checkbox"/> Electric <input type="checkbox"/> LP <input type="checkbox"/> Fuel Oil <input type="checkbox"/> Other:	

Energy Efficiency Recommendations

1
2
3
4
5

Total Cost of Energy Audit

Total Incentive Amount Requested (*Enter half the amount entered on the previous line, or \$200, whichever is less*):

OFFICE USE ONLY

<input type="checkbox"/> Approved <input type="checkbox"/> Not Approved-Reason:	Total Incentive Issued: \$
Cooperative Representative: _____ Date: _____	