



Kit Distribution Acknowledgement Form

Please complete the following form to acknowledge receipt of an energy efficiency kit and to request more information about energy efficiency offerings through Ameren Illinois.

NAME: _____
First Last

ADDRESS: _____

CITY: _____, IL ZIP: _____

EMAIL: _____

PHONE NUMBER: _____

BEST WAY TO CONTACT YOU: (CHECK ONE) Phone Email

BEST TIME TO CONTACT YOU: (CHECK ONE) Morning Afternoon No Preference

WHAT TYPE OF ACCOUNT DO YOU HAVE WITH AMEREN ILLINOIS? (CHECK ONE)

Electric Gas Combo (Both Electric and Gas) Not Sure

DO YOU HEAT YOUR HOME WITH GAS OR ELECTRIC DELIVERED BY AMEREN ILLINOIS? (CHECK ONE)

Yes No I'm Not Sure

DO YOU HAVE A SMART THERMOSTAT INSTALLED IN YOUR HOME?

Yes No

HOW MANY MEMBERS ARE IN YOUR HOUSEHOLD (INCLUDING YOU)? (CIRCLE ONE)

1 2 3 4 5 6 7 8

BASED ON YOUR HOUSEHOLD SIZE, IS YOUR TOTAL HOUSEHOLD INCOME AT OR BELOW THE AMOUNT LISTED IN THE TABLE TO THE RIGHT?

Yes No

| HOUSEHOLD MEMBERS | MAXIMUM INCOME |
|-------------------|----------------|
| 1 | \$37,464 |
| 2 | \$50,736 |
| 3 | \$63,984 |
| 4 | \$77,256 |
| 5 | \$90,504 |
| 6 | \$103,776 |
| 7 | \$117,024 |
| 8 | \$130,296 |
| 9 | \$143,544 |
| 10 | \$156,816 |
| 11 | \$170,064 |
| 12 | \$183,336 |
| 13 | \$196,584 |
| 14 | \$209,856 |
| 15 | \$223,104 |

Referring Agency: _____
**If applicable*

By completing this form, I agree to install the kit measures and I give Ameren Illinois permission to contact me by email or phone regarding the Energy Efficiency Programs. This information will not be sold, rented or leased to any third party.