



Raft River Rural Electric Co-op, Inc. VFD PURCHASE REQUEST

Agriculture Conservation Resources

Member Information				
Member Account Name		Contact Name		Phone Number
Mailing Address		City	State	Zip
Member Account Number	Srv Map Loc	Installation Address (if different than above)		Email address

I authorize Raft River Electric Co-op, Inc. to order a Variable Frequency Drive panel and Matrix Filter for my use and I agree to pay for this equipment.

Panel Size: _____

Panel Cost: _____

Filter Cost: _____

Total Cost: _____

I acknowledge that this VFD installation must meet Bonneville Power Administration and Raft River Electric's requirements in order to qualify for a rebate. All maintenance and future replacement costs for this equipment will be my responsibility.

Member Signature

Date

Raft River Electric Representative Signature

Date

Mailing Address: Raft River Rural Electric Co-op, Inc. PO Box 617 Malta, ID 83342 208-645-2211 or 800-342-7732

Office Use Only

PO#

Project Name

Approved by

Date Ordered