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Generac Home Standby Generator Purchase Acknowledgement

Member Signature	Print	Date	
Cooperative"), its officers, dire all liabilities, damages, obligati expenses (including reasonab	ctors, employees, contractorions, losses, claims, causes le attorney's fees, expert fe gned as a result of purchas	c Cooperative (hereinafter references and representatives from an sof action, costs, debts, dues, es and court costs), of whatsocing, installing, maintaining, reproperative.	nd against any and charges or ever kind and
notify MJM if my installer chan	iges prior to pick up. I also ι	o pick up my generator order o understand that MJM is not res I have authorized to pick up or	ponsible for the
Č		row disconnect switch installed	,
I understand that all sal	les are final after purchase,	and I cannot cancel or return r	my order.
function and operation thereof	, and all warranties are prov	ntee the equipment provided o vided through Generac. I under provider or installer for service-	rstand that I
	nd energy needs of my hom	erly sizing the generator for my ne requested from MJM's meter	•
I understand that MJM potential participation in memb		ntact me in the future regarding and response initiatives.	my interest in
understand that MJM does not	t endorse or recommend spoons or or recommend spoons are for n	n or service of Generac general pecific installers or warranty ser my reference and convenience ler of my choosing.	rvice providers,
I understand that MJM's endorsement or recommendat		s a marketing partner does not manufacturers.	imply any
I hereby acknowledge my und	erstanding of all the followir	ng terms and conditions (please	e initial each):

(If Tax Exempt, provide ID number: _)
*Must provide copy of tax-exempt for	rm for our records	
MJM Member Phone Number		
	(if you have authorized them as a contaby MJM. Orders will be available 2-3 we	
Installer's Name & Contact Number:		
Generator's Serial Number:		
Maximum purchase quantity	y: 2 per meter location.	
OFFICE USE ONLY:		
GENERATOR SIZE:	(kW) INVOICE:	
Service Map Location:	Account Number:	
Delivery Date:	By (Initial):	