

Lewisburg Gas Department

BANK DRAFT PLAN APPLICATION

I, the undersigned customer of the Lewisburg Gas Department, hereby request to pay for my natural gas service by **BANK DRAFT**.

Each month a bill will be sent to me. It will show the amount of my gas bill for that month and be stamped paid with the date the bank draft will be deducted from my account.

Conditions of this Agreement

1. I must supply Lewisburg Gas Department with a voided check.
2. The Lewisburg Gas Department will send me a bill each month before my bank account is drafted.
3. The amount will be drafted from my bank account on the stamped paid date.
4. I can stop a particular automatic draft on my account by notifying the Lewisburg Gas Department before the due date.
5. I have the right to cancel my participation in the Bank Draft Plan by notifying the Lewisburg Gas Department and giving them a reasonable amount of time to process my request.
6. The Lewisburg Gas Department and my bank institution reserve the right to end my participation in the Bank Draft Plan.
7. I will be notified in writing following termination.

Name: _____

Service
Address: _____

Telephone #: _____

Gas Bill Route & Acct. #: _____

Bank: _____

Bank Acct. # _____

I authorize the Lewisburg Gas Department to automatically draft my bank account for payment of my monthly bill.

Signed: _____ Date: _____

For Office Use Only

Approved By: _____

Date Began: _____

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