The Convenient Way To Pay Your Electric Bill

## INSTRUCTIONS

- 1. Use the Print button or File Print command from the pull-down menu in Adobe Acrobat Reader to print this form.
- 2. Please read and sign the authorization agreement below.
- 3. Fill out the rest of the form. Attach a voided check.
- 4. If you are not sure what your Elizabethton Electric Department (EED) account number is, look at your statement bill. Your account number appears twice: it is located in the top left block on your statement portion, and again in the top block on the stub portion of your bill. Both are labeled.
- 5. The Due Date for your bill is located on the bottom (stub) portion of the bill and is labeled "Due Date For Current Bill". The day of the month listed here is your due date for every month's bill. Please note that Auto Draft customers will never be assessed a late charge, even if a weekend or holiday causes your account to be drafted after the due date. EED always counts payments made on the next business day as 'on time' for due dates that fall due on weekends or holidays.
- 6. Return this form to the Elizabethton Electric Department with your next payment, or you may drop it off at our office, or you may mail to: Attention Billing Department, Elizabethton Electric Department, P.O. Box 790, Elizabethton, TN 37644-0790. Auto Draft will be in effect by the next billing cycle.

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I, hereby authorize the Elizabethton Electric Department to automatically debit my bank account for payment of my monthly electric bill. I agree that each payment shall be the same as if it were an instrument personally signed by me. This authorization will remain in effect until revoked by me in writing, or due to involuntary revocation due to two instances of insufficient funds within a one-year period in my drafted account. If Elizabethton Electric Department receives written notification, it shall have a reasonable time to effect all necessary requirements to terminate this agreement. Elizabethton Electric Department does not accept checks or allow bank accounts to be drafted if they are found with insufficient funds twice in any twelve month period. I understand that should this occur, it will be one year from the latest overdraft before I can be reinstated into the Auto Draft program. Due to fluctuations caused by weekends and holidays, Elizabethton Electric Department drafts participant's accounts within three business days on either side of the customer's due date. I understand that it is my responsibility to have funds available at any time within this period. Further, I understand that Elizabethton Electric Department will continue to send me a bill each month and that if there is any error or dispute on the bill I must notify Elizabethton Electric Department. I also realize that if an adjustment is warranted on a current month's bill, the adjusted debits or credits may be applied after the bank account has been drafted, and may not appear until the next billing cycle. I understand that Elizabethton Electric Department may impose processing fees for accounts that are found to contain insufficient funds. I understand that this agreement is non-transferable and non-negotiable.

SIGNED	DATE	
,	***Please Print***	
NAME	ADDRESS	
CITY	STATE	ZIP
HOME PHONE	WORK PHONE	
ACCOUNT NUMBER AS SHOWN ON YOUR ELE	CCTRIC BILL	
NAME OF YOUR BANK OR FINANCIAL INSTIT	UTION	
CITY	STATE	ZIP
TVPE OF ACCOUNT CHECKING	SAVINGS	