

Budget Billing

Irvington Monthly Payment Plan Agreement

Benefits: As long as this agreement is in effect, the customer is entitled to the following benefits:

1. Equal Monthly Payment of Estimated Season's Fuel Cost
2. No Finance Charges
3. No Deferred Payment Charges

I understand and agree to the following:

1. I am over 18 years of age and the head (provider) of my household.
2. To make monthly payments as outlined in below schedule.
3. Customer will be invoiced for the monthly payment amount on Irvington Gas's normal statement mailing cycle date.
4. Upon receipt of a statement of my account in June, I will promptly pay Balance Due. Failure to do so will prohibit me from continuing on the Monthly Payment Plan Agreement for the next heating season commencing in July.
5. If my June statement reflects a credit balance, it will be applied to the subsequent budget period unless the customer requests a refund.
6. This Agreement will be terminated in writing by Irvington Gas if:
 - A. Customer fails to pay the regularly scheduled monthly payment within 25 days after statement mailing date.
 - B. Customer makes partial payment rather than full scheduled payment.
7. Customer's participation in this Plan may be terminated at any time at the customer's request. Any outstanding balance due Irvington Gas at the time of termination will become due and payable.
8. A customer's budget payment amount is subject to review and possible adjustment due to a change in customer's usage and/or product costs. These reviews are conducted at least once every six months, usually in January and July. The customer will be contacted if the review indicates an adjustment is necessary.
9. Interest will not be paid on any debit balance which may be due at the end of the budget year.
10. If all provisions have been fulfilled, this Agreement will be self renewing from heating season to heating seasons if not terminated by the customer. If the number of payments in this Agreement are less than twelve (12), it will not be enrolled for twelve (12) payments based on their prior year's purchases.

Payment Schedule

Number of Payments

1st Payment Due In

12

July

11

August

10

September

Estimated Total Season Heating Cost _____

Number of Payments _____

Starting Month _____

Amount of Monthly Payments _____

Account Number _____ Reference _____

First Name _____ Last Name _____

Street Address _____

City _____ State _____ Zip _____

Phone Number _____ Alt. Phone _____

E-mail Address _____

__ I understand by submitting this form I am applying for Budget Billing. I also understand that submitting this application is as legally binding as signing and submitting a normal paper application with my signature.

Please type your name above.