

## SEQUACHEE VALLEY ELECTRIC COOPERATIVE

## **BUDGET BILLING PAYMENT PLAN**

## **APPLICATION & AGREEMENT**

Budget Billing Payment of \$ (excludes outdoor light, surge protection, etc)
Member(s) Name(s)
Mailing Address
Phone # Account # Location #
I, the undersigned member(s) of Sequachee Valley Electric Cooperative, hereby request and make application to pay for my electric service by the BUDGET BILLING PLAN. Further, I understand and agree that the monthly payment indicated above will be reviewed at least semi-annually and necessary adjustments made as required due to changes in kWh consumption, rate schedule, fuel cost adjustments, etc. I further understand that after twelve (12) months, my account will "settle up". As a result of the "settle up", I will either owe the electric cooperative for any kWh that I have not paid for, or receive a credit for any kWh that I have overpaid.
CONDITIONS OF THIS AGREEMENT
This agreement is subject to cancellation at any time due to:
<ol> <li>Termination of electric service by the undersigned at the service location identified herein.</li> <li>Any late payment could result in being removed from the budget billing plan.</li> <li>Disconnection of service for non-payment of bill or any other violation of By-Laws or Schedule of rules and Regulations</li> <li>Thirty days written notice by either party.</li> </ol>
Signature(s): Date:
Approved for SVEC: Date: