

# BUDGET BILLING APPLICATION

CSA	FILE IN: _____
	CYCLE: _____

## INSTRUCTIONS

- 1) Select budget option: Rolling or Fixed. (Only complete the information for the budget option you select.)
- 2) Complete the highlighted areas by printing, except for signature area at bottom.
- 3) Contact JCPB at 952-5014 if you have not lived at the location for more than one year.
- 4) Return to JCPB via the contact information on the front of this form.

### OPTION 1 - ROLLING BUDGET PLAN

Name \_\_\_\_\_

Account \_\_\_\_\_

Address \_\_\_\_\_

Beginning Average \_\_\_\_\_

I, hereby, authorize Johnson City Power Board (JCPB) to establish my account in the Rolling Budget Plan. I understand my beginning budget average will fluctuate month-to-month according to my actual usage and there is no settle-up month with the Rolling Budget Plan. I understand that during the month of June, JCPB will determine the budget forecast for the upcoming budget year, which may inflate my actual average. Budget forecasting takes into consideration possible rate increases and unforeseen weather conditions that would directly effect billing amounts. I agree to pay the budget amount on or before the due date during each billing period. If I fail to comply with this requirement, I understand my account will no longer qualify for the Rolling Budget Plan and any unpaid balance will become due at that time. I further understand that all previous unpaid balance must be paid on my account before my Rolling Budget Application will be processed.

I understand if I move to another service location or out of the JCPB service area that any unpaid balance will become due upon transfer or termination of my service at the account listed above.

I understand the budget amount includes security light charges, if applicable. Any other monthly charges, such as monthly loan payments and/or recurring charges are billed in addition to my Rolling Budget listed above.

**Residency requirements:** I understand if I have not lived at this location for the past twelve months that my budget payments may not be accurate and I may owe a debit balance at budget year-end.

By signing this form, I am in complete understanding of the terms of this agreement. Upon receipt of written notification, I understand this agreement may be cancelled by JCPB or myself at anytime (proper identification is required).

Customer's signature \_\_\_\_\_ Date \_\_\_\_\_

### OPTION 2 - FIXED BUDGET PLAN

Name \_\_\_\_\_

Account \_\_\_\_\_

Address \_\_\_\_\_

Budget amount per month \_\_\_\_\_

I, hereby, authorize Johnson City Power Board (JCPB) to bill my account per the budget amount listed above. I further understand that all previous unpaid balance must be paid on the account before my application for the Fixed Budget Plan may be processed. I agree to pay the budget amount on or before the due date each billing period. If I fail to comply with this requirement, I understand my account will no longer qualify for the Fixed Budget Plan and all unpaid balance will become due at that time.

I understand that the entire amount listed on the settle-up bill, which I will receive during the month of June or July, is payable by the due date listed on that billing or any credit amount shown on the settle-up bill may be refunded upon my request.

I understand I do not have to reapply for the Fixed Budget Plan each year while at the same location. I understand that during the month of June, JCPB will determine the budget forecast for the upcoming budget year, which may inflate my actual average. Budget forecasting takes into consideration possible rate increases and unforeseen weather conditions that would directly effect billing amounts.

I understand if I move to another service location or out of the JCPB service area that all unpaid balance will become due upon transfer or termination of my service at the account listed above.

I understand the budget amount includes security light charges, if applicable. Any other monthly charges, such as monthly loan payments and/or recurring charges are billed in addition to my budget amount listed above.

**For bank draft customers:** I understand that any debit balance due on the settle-up invoice will be drafted from my account on the draft date listed. Credit balances may be refunded upon request.

**Residency requirements:** I understand if I have not lived at this location for the past twelve months that my budget payments may not be accurate and I may owe a debit balance at budget year-end.

By signing this form, I am in complete understanding of the terms of this agreement. Upon receipt of written notification, I understand this agreement may be cancelled by JCPB or myself at anytime (proper identification required).

Customer's signature \_\_\_\_\_ Date \_\_\_\_\_