

Autopay

Auto-Pay is a billing program that allows you to pay your gas bill on time, every time, without writing checks, licking envelopes or running to the post office. With auto-pay, your gas bill is automatically deducted from your checking account on its due date. Auto-pay is a free service offered to Community Natural Gas customers.

How does the auto-pay plan work?

You will need to provide us with a voided check when you enroll in auto-pay. Then, we will debit your gas bill amount directly from your bank account automatically each month.

How do I participate?

You must request auto-pay by completing the application on the back of this letter and returning it our billing office.

Will I still receive a bill every month?

Yes. You will still receive a postcard bill showing current charges. It will show a message that says the amount due will be deducted from your checking account on the due date. You would then need to record that amount in your checkbook. No banking information will appear on your bill.

Can I enroll in the auto-pay plan if I am a budget customer?

Yes, your budget amount will be deducted from your account each month.

What if there is not enough money in my checking account?

It is important that you maintain an account balance sufficient to cover your utility bill. If there is not enough money in your checking account to cover the amount of your bill, your bank will notify us and it will be handled in the same manner as an insufficient funds check.

How can I discontinue the auto-pay plan?

Just call your local office and request that we remove you from the plan. You must call at least 10 days before your due date for it to take effect. You would then be responsible for making payment by cash, check or money order by the due date.

When will the deductions start?

Enrollment must be received by the 25th of the month to be valid for the following months billing. For example, enrollment would need to be received by Jan. 25th to have the payment due in February to be taken out automatically.

AUTO-PAY ENROLLMENT

Account #: _____

Name: _____

Service
Address: _____

Phone#: _____

To complete the registration, please sign below and attach a voided check with the same name as the account listed above. Please return this form to the address listed below.

Signature

Date

ATTACH VOIDED CHECK HERE

Return to: Community Natural Gas Co., Inc.
P.O. Box 459
Owensville, IN 47665