

BUDGET BILLING APPLICATION

As a member of GRAHAM COUNTY ELECTRIC COOPERATIVE (GCEC) and/or GRAHAM COUNTY UTILITIES (GCU), I hereby make application for acceptance in the Budget Billing Program. I understand that my bills for the 12-month period beginning in November will be a fixed amount determined by averaging the previous 12 months usage plus a rate adjustment factor for increased costs if necessary. I understand that each year a re-averaging of the usage will be done and any remaining balance applied to the account resulting in my new budget amount for the following year. GCEC/GCU may also adjust the budget billing amount during the year in the event the estimate of the usage or cost varies significantly from my actual usage or cost. I also understand that I will be subject to the following conditions in order to participate in this program:

1. Must have a minimum of 12 months of continuous usage history.
2. Credit must remain in good standing. If any of the following issues occur then the account may be removed from the program.
 - a. More than two delinquent payments in a 12-month period.
 - b. Disconnected for non-payment.
 - c. Returned check for insufficient funds.
3. The amount paid each month must be equal to the budget amount set at the beginning of the budget cycle. If the amount paid is less than the budget payment amount then GCEC reserves the right to remove the customer from the Budget Billing Program.

I understand that if my account is removed from the Budget Billing Program for the reasons listed above then I will be required to reestablish a good credit rating for at least 12 consecutive months before being eligible to participate. I also understand that if I voluntarily remove my account from the program then I will not be eligible to participate until the next enrollment period.

Name _____ Date _____

Address _____ City _____ State _____ Zip Code _____

Phone Numbers (Home / Cell / Work) _____

Account Numbers:

Signature _____