

**City of Sylvania
104 South Main Street
Sylvania, GA 30467
912-564-7411**

BUDGET BILLING REQUEST

The City of Sylvania offers Budget Billing Program to its customers to facilitate their payment of City of Sylvania utility bills. This program is available to residential customers with a minimum of twelve months billing history at their current address and who is in good standing with the City (no cutoffs, penalties or bad checks).

AUTHORIZATION AGREEMENT FOR BUDGET BILLING

Customer Account # _____ Service Address _____

I hereby authorize the City of Sylvania to establish my account on a monthly billing cycle to average my billings based on my prior 12 months billing history plus 10% to reflect the average billing amount to be paid each billing cycle.

Name _____ Address _____

City _____ State/Zip _____ Telephone _____

This authorization shall remain in full force and effect until the City of Sylvania has received written notification from the customer of its termination in such time and in such manner as to afford the City of Sylvania reasonable opportunity to act on it. Upon termination of budget billing, my account shall be paid in full regarding all sums owing through the Budget Billing program termination date.

The City of Sylvania reserves the right to modify the terms of this agreement or to terminate it at the sole discretion of the City of Sylvania.

Date _____ Signature of account holder _____

*****OFFICE USE*****

12 month total \$ _____

Average \$ _____

Add 10% \$ _____

Monthly total \$ _____

First budget bill payment due 1 2 3 4 5 6 7 8 9 10 11 12

Prepared by _____ ATTACH CASELLE CALCULATION