



# AUTOMATIC PAYMENT ENROLLMENT FORM



- 1) Complete "Personal Information" section.
- 2) Choose **ONE** Automatic Payment Option and complete **EITHER "Bank Draft" OR "Credit Card"** section.
- 3) **Sign and mail this form, with your next payment, to: PIE&G, PO Box 308, Onaway, MI 49765.**

Monthly meter reading must still be provided by phone 1-866-999-4571, by mail on your billing stub, or online at pieg.com until we receive automated readings.

## ● Personal Information

MEMBER'S NAME: \_\_\_\_\_ DAYTIME PHONE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_  
Street City State ZIP

SERVICE ADDRESS: \_\_\_\_\_  
Street City

**Please list ONLY the accounts that you wish to enroll in Automatic Payments below:**  
(Use the back of this form if you wish to enroll additional account numbers.)

Internet/Phone: \_\_\_\_\_ Electric: \_\_\_\_\_ Natural Gas: \_\_\_\_\_

## CHOOSE ONLY ONE AUTOMATIC PAYMENT OPTION:

### A Bank Account Draft

**\* INCLUDE A BLANK VOIDED CHECK**

FINANCIAL INSTITUTION: \_\_\_\_\_

BANK ROUTING: 

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 BRANCH: \_\_\_\_\_

BANK ACCOUNT: 

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 SAVINGS  CHECKING

Your FULL Bank Account number is nine (9) to fifteen (15) digits long, available from your financial institution or printed on your voided check\*.

**OR**

### B Credit or Debit Card

CREDIT CARD TYPE:  AMERICAN EXPRESS  VISA  MASTERCARD  DISCOVER

CARD NUMBER: 

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 EXPIRATION: 

m	m	y	y
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CARD HOLDER'S NAME: \_\_\_\_\_

Print your Name EXACTLY as it appears on your Credit or Debit Card.

I hereby authorize PIE&G to deduct my utility/services payment for the above listed account(s) each month on my due date or next business day from my bank/credit union account, credit card, or debit card listed above. I acknowledge it is my responsibility to contact PIE&G to update the expiration date on my credit card or any changes to credit card or bank draft information. I agree that adjustments to correct errors are authorized and that a fee may be charged if payment is declined. This authorization will remain in effect until I provide adequate notice\* to PIE&G to cancel auto-pay if I decide at any time to discontinue this serve. All information will remain confidential.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

\* Your account must go through a billing process after we receive this enrollment form from you, and we must receive payment authorization from your financial institution. It may take 30-60 days before your enrollment can be fully processed. Please continue to pay by the due date the "Amount Due" on your bill, until your billing statement includes a "Do Not Send Payment" notice.