



**CITY OF HUNTINGBURG**  
**P.O. BOX 10**  
**HUNTINGBURG, IN 47542**

### **UTILITY BUDGET BILLING AGREEMENT**

I, the undersigned, request that the charges for the City of Huntingburg utilities consumed at the address listed below be included on the City's budget billing agreement as defined in the City Ordinance authorizing this agreement.

The estimated monthly budget payment is calculated by taking my total actual utility bills for the latest twelve (12) month period and dividing this amount by eleven (11). This average amount becomes my monthly billing for the eleven-month period beginning in October and ending in August of the following year. The September bill will adjust my actual consumption against my budgeted payments, which may be more or less than estimated. I agree to pay any additional charges over the estimate, and in the event of an overpayment at my option will either receive a refund or have that amount credited to my utility bill. In the event that my actual consumption of utilities increases in excess of fifteen (15%) the City reserves the right to alter the estimated budget monthly amount to reflect that additional consumption. In the event of termination of service(s) my account will be reconciled immediately. Also, either the City or I have the right to terminate this agreement giving thirty (30) days advance notice to the addresses listed on this agreement.

**I cannot be delinquent under the Budget Billing Program. I understand that in the event a payment is delinquent, I will be removed from the Budget Billing Program. This agreement remains in effect for one year and must be renewed on an annual basis.**

BUDGETED BILLING ESTIMATE      \$

DATE:

ACCOUNT NUMBER: \_\_\_\_\_

NAME: \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

CUSTOMER SIGNATURE: \_\_\_\_\_

SPOUSE SIGNATURE: \_\_\_\_\_