

## **HART ELECTRIC MEMBERSHIP CORPORATION LEVELIZED BILLING PROGRAM**

A member can only sign up for Levelized Billing in the months of April, May, September, and October. Applications may be taken at any time throughout the year, but will be held until these months.

### Levelized Billing Requirements:

- (1) The member must live in a single family, separately metered residence that he or she owns or is buying.
- (2) The member must have 13 months acceptable credit history which entails the following:
  - (a) Three or less delinquent notices (\$5.00 late charge)
  - (b) No collection notices (\$6.00 trip charge)
  - (c) No disconnection for nonpayment
  - (d) No returned checks
- (3) The member must sign and return the enclosed Levelized Billing Agreement.

### About Levelized Billing:

It is important to understand that Hart EMC's Levelized Billing is based on **averages**. Due to averaging, the member's bill **may not** be the same amount each month, but it will help to lower the variations of spring to summer and fall to winter bills. The section of your bill listed as TOTAL AMOUNT DUE shows the amount that is to be paid. Any other information is for the benefit of the member only.

It is also important to understand that although an account is on levelized billing, the bill must still be paid on or before the due date each month or it will accumulate late charges. It will also still be subject to disconnection if not paid.

Hart EMC reserves the right to take an account off of levelized billing at any time. If taken off, the member must wait a time period of 12 months before being considered for the program again.

**\*\* Hart EMC advises any member who is on the levelized billing program to pay close attention to the kilowatt hour usage each month. Levelized billing could cover up a problem with electrical equipment that may cause an increase in the amount of the bill.**

**HART ELECTRIC MEMBERSHIP CORPORATION**

P.O. Box 250  
Hartwell, GA 30643

**LEVELIZED BILLING AGREEMENT**

Member's Name _____	Telephone Number _____
Address _____	Social Security Number _____
City _____ State _____ Zip _____	Employer _____
Account Number _____	Employer's Telephone Number _____
Cycle Number _____	Spouse _____
Date of this Agreement _____	Next of Kin -Name and Phone Number _____

**I, the undersigned, hereby apply for levelized billing to the residence at the address listed herein above with all service being supplied by Hart Electric Membership Corporation in accordance with the Service Rules and Regulations established by said Corporation and any future changes and modifications hereinafter so adopted by said Corporation.**

**I understand and agree that my monthly bill will be based on my average consumption for the most current 12 months usage.**

**In case I am a new member, the bill will be based on the average of the then available billing history on my account (total usage to date divided by the number of months' history available until such time as I have 12 months history). I will provide a satisfactory letter of credit from my previous utility company.**

**I further understand and agree I may be removed from the levelized billing if I fail to pay all bills promptly when rendered.**

**I will at that time pay my balance in full and return to regular monthly billing. I understand at any time I choose to return to regular monthly billing, move to another residence, or when I discontinue service, the balance on my account will be due and payable or any credit refunded.**

**If my account is referred for collection by Hart EMC to any outside agency and/or attorney who is not a salaried employee of Hart EMC, I will to the extent permitted by law, pay all fees and/or court costs.**

**It is further understood when a rate increase or decrease occurs, my payments may be adjusted accordingly.**

**It is understood and agreed that this agreement will continue from month to month and year to year so long as I am a consumer and so long as I promptly make all payments due under this agreement or until such time as either party requests discontinuance of this levelized billing agreement.**

Consumer Signature: \_\_\_\_\_

**Hart Electric Membership Corporation**

By: \_\_\_\_\_

Title: \_\_\_\_\_