



PAPERLESS BILLING ENROLLMENT

Name on Utility Account _____

Service Address _____

Billing Address, if different _____

Home Phone _____ Work Phone _____ Cell _____

Please enroll me in the Paperless Billing Program. I understand that my enrollment is strictly voluntary and will remain in effect until I cancel my participation in writing. I understand and agree that:

1. I will no longer receive a paper bill delivered to my home by the U.S. Post Office.
2. I will receive my monthly City of Yukon utility bill in the electronic mail inbox address that I list below. It will be sent on or before the first business day of every month as long as I am enrolled in this program.
3. All related City of Yukon policies regarding my due date, late penalties and service termination remain in force and are applicable to all customers, regardless of the type of bill received.
4. It is my responsibility to pay my monthly bill on time each month to avoid a late fee and possible service interruption. Failure to receive an electronic or paper bill does not waive any fees or policies. It is my responsibility to contact Utility Billing prior to the due date if no bill was received.
5. I will notify the City of Yukon immediately, or no later than the 25th calendar day of the month, if my e-mail address changes or I wish to discontinue paperless billing.
6. I understand that my electronic bill will not include informational 'inserts' that are included occasionally with mailed paper bills and that I must click on the link provided with the bill to view them.

By my signature below, I/we acknowledge and agree to the above.

Please send my monthly bill to this e-mail address (please print and write legibly):

Signature _____ Date _____

Utility Account Number(s) _____

