



Floresville Electric Light & Power System

Recurring Payment (Debit or Credit Card and ACH) Authorization Form

ELECTRIC ACCOUNT INFORMATION (Please Type or Print):

Name on Account: _____

Account Number(s): _____

CHECK APPROPRIATE BOX:

New Enrollment Information Change Cancel Participation

(NOTE: If you are cancelling participation, please do not include card or bank information.)

CREDIT CARD AUTOMATIC DRAFT - CARDHOLDER ACCOUNT INFORMATION (Please Type or Print):

Name as it appears on Card: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone #: _____ Debit Card Credit Card

Cell Phone #: _____ MasterCard Visa

Work Phone #: _____ Discover

Card Number - - -

Security Code Expiration Date: Month Year

BANK ACCOUNT AUTOMATIC PAYMENT - (ACH) INFORMATION (Please Type or Print):

Name on Bank Account: _____

Billing Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Home Phone #: _____ Cell Phone #: _____

Work Phone #: _____

Financial Institution's Name: _____

Financial Institution's Address: _____

Financial Institutions' Routing #: _____ (Attach a voided check or savings slip)

Checking Account #: _____ or Savings Account #: _____

TERMS OF AGREEMENT:

Transactions are drafted on your due date of each month. If for any reason your payment is rejected, Floresville Electric Light & Power System (FELPS) will notify the customer of record in writing by email or by mail and the electric account will be subject to all applicable penalties, fees and disconnection, if not paid. If your payment is rejected two times, you will be removed from this Recurring Payment Option and the customer of record will be responsible for payment by the due date. It is your responsibility to notify FELPS of any updates or changes to your payment or contact information, including card number, expiration date, security code, bank account number, and email or mailing address by filling out and submitting a new Record Payment Authorization Form. Forms can be obtained on our website, www.felps.us.

I, the undersigned, agree to the terms and authorize Floresville Electric Light and Power System (FELPS), the Merchant, to keep my signature on file and to initiate the requested Recurring Payment Option on an ongoing basis in the amount due on the monthly billing statement for the FELPS account(s) identified above. I understand that these transactions will continue until I notify FELPS otherwise, in writing. I agree to hold Floresville Electric Light & Power System harmless for charges resulting from my failure to provide FELPS with update Account and Contact Information. I further authorize FELPS to initiate payment on my final bill on the payment method identified above.

Cardholder Signature: _____ **Date Signed:** _____

Please Return Form to: Floresville Electric Light & Power System
187 State Highway 97 E, Floresville, TX 78114
Customerservice@felps.us