

# HIGH WEST ENERGY



## CREDIT CARD AUTHORIZATION

I authorize a payment to High West Energy on my credit card as indicated by the checkmark below. This payment will be made automatically the **23<sup>rd</sup> of each month.**

MasterCard      Card # \_\_\_\_\_

Visa      Name on card \_\_\_\_\_

Discover      Expiration date \_\_\_\_\_

Type of card (check one)    \_\_\_ Debit card    \_\_\_ Credit card

Name(s) on Account \_\_\_\_\_

Account Number(s) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

*It is the member's responsibility to provide High West Energy with updated information. Auto pay programs are offered as a convenience to the member. Declined payments will be treated as insufficient funds and will be subject to a \$25 fee and may result in negative activity on your credit report. If, for any reason, you have more than three (3) declined payments in a calendar year, you will be removed from the auto pay program and required to pay by cash or money order. After twelve (12) on-time payments, the auto pay program may be reactivated after the necessary paperwork is completed.*

*If you are participating in the auto pay option in lieu of a deposit, you must remain on auto pay for a minimum of twelve (12) months. In order to be removed from the auto pay program during this time period, a deposit equivalent to three months of service will be required. In the event of an insufficient payment, you will be removed from auto pay and charged a deposit equivalent to three months of service, in addition to a fee for the insufficient payment.*

Please sign below and return this form to: High West Energy Billing Dept. | P.O. Box 519 | Pine Bluffs, WY 82082

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