



## AUTOMATIC CREDIT CARD PAYMENT AGREEMENT



Customer Name: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

GHU or CUC Account #: \_\_\_\_\_ Work Phone #: \_\_\_\_\_

Service Address: \_\_\_\_\_

1. GHU/CUC will continue to provide you with a bill every month even though you are on the credit card payment plan. The bill will state **Do Not Pay-Credit Card Payment**.
2. Payment due on your water/wastewater bill will be charged to your credit card on or about the 10<sup>th</sup> day depending on weekends and holidays after your GHU/CUC bill is rendered. (The charge will appear as “**FAIRBANKS SEWER AND WATER**” on your credit card statement).
3. If your credit card is declined, a fee is charged to your account per approved tariffs.
4. If the credit card is declined for any reason, customer service will attempt to contact you so that other arrangements can be made. If your credit card is declined twice in a one-year period, this agreement may be cancelled.
5. If you have any questions or wish to cancel this agreement, please call our Customer Service Department at 479-3118.
6. This agreement will remain in effect until cancelled by either party.
7. You are required to keep your credit card information current. This may be done online by logging into your account at [www.akwater.com](http://www.akwater.com) or by contacting our office. GHU/CUC will attempt to notify you of expiring credit card information.

This agreement authorizes GHU/CUC to automatically deduct the balance of my water/wastewater account from the credit card number listed below. I declare that the account number given belongs to me, and that any changes to or cancellation of the automatic payment plan will be made strictly by me.

Customer Authorization (sign): \_\_\_\_\_ Date: \_\_\_\_\_

Please return to:	Utility Services of Alaska, Inc. P.O. Box 80370 Fairbanks, AK 99708-0370	Phone: (907) 479-3118 Fax: (907) 474-0619 Email: <a href="mailto:usainfo@akwater.com">usainfo@akwater.com</a>
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GHU/CUC Representative: \_\_\_\_\_ Date: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Expiration Date: \_\_\_\_\_ CVV# \_\_\_\_\_

Credit Card Holder Name: \_\_\_\_\_

Credit Card Billing Address: \_\_\_\_\_