



407 State St
Hart, MI 49420

Telephone: 231-873-2488 Fax: 231-873-0100

PAPERLESS BILLING ENROLLMENT

Paperless utility billing is now available to utility customers within the City

Name _____

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 Hart utility bill at the email address I have listed below.
3. All related City of Hart 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. Failure to receive a paperless bill does not waive past due penalty. If necessary, shutoffs and reminder notices will be sent to my email address as well.
4. I agree to notify the City of Hart 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. Failure to change email address with the city office will not be reason to waive any penalties.

Please send my monthly bill to this email address (please print):

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

Signature _____ Date _____