



## AVERAGE MONTHLY PAYMENT PLAN

### I. Purpose

This plan allows customers the option of leveling their monthly utility payment.

### II. Enrollment

The City of Brenham has open enrollment for the Average Monthly Payment Plan, which means that qualified applicants may sign up at any time. Average monthly payments will be based on a running average. This average is calculated based on the customer's current bill plus their last eleven bills.

### III. Criteria for Eligibility for the Average Monthly Payment Plan

1. Customer must be a residential account.
2. Customer must have at least 12 continuous months of utility billing service.
3. Customer must have a zero balance to qualify for the plan.
4. Customer must not have been delinquent in the last 12 months. <sup>(1)</sup>
5. Customer must not have had a check returned for insufficient funds in the previous 12 months. <sup>(1)</sup>
6. When a customer signs up for the Average Monthly Payment Plan and subsequently withdraws, the customer cannot re-enroll for a 12 month period. A customer must meet all eligibility requirements at the time the customer re-enrolls in the plan.

### IV. Billing Policies

1. Average Monthly Payment is a payment arrangement; therefore no other payment arrangements will be accepted for customers on this program.
2. Due dates will remain the same as the normal billing cycle and all penalty and cutoff policies will remain in effect.
3. No penalties will accrue, regardless of the account balance if payment is received by the due date.
4. Participation in the electronic payment program is preferred.
5. In the event of nonpayment disconnection, the customer will be required to bring their account to a zero balance and will no longer be eligible for the plan.
6. Should a customer voluntarily withdraw from the plan, the AMP shortage/excess will be applied to the customer's account.

### V. Open Enrollment

- <sup>(1)</sup> **During the Introductory Open Enrollment period of February 6, 2009 through April 30, 2009, this requirement will be waived if the customer also participates in an electronic payment program.**

I, the undersigned Customer, understand the requirements for participation in the AMP plan.

\_\_\_\_\_  
Customer Acknowledgement

\_\_\_\_\_  
Date

\_\_\_\_\_  
Account#

\_\_\_\_\_  
Print Customer Name

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