



For company use only

Account Number	
FPP Amount	

www.collettpropane.com

Automatic Pay Options Flex Pay Plan PAYMENTS

I authorize Collett Propane Inc. to draft my monthly FPP payment from the financial institution listed below. The draft will occur each month. I understand if charges are declined by my bank or credit card provider I will be contacted by Collett Propane to ensure uninterrupted service and may be subject to a processing fee of \$25.00. This authorization will remain in effect until I (we) cancel this authorization. To cancel I (we) must notify Collett Propane and BANK in writing, in advance, to give Collett Propane and BANK a reasonable opportunity to cancel authorization.

Account Information – Bank (checking) Checking Account (attach a voided check)

Name of Bank: _____ Bank Transit Number: _____

Bank Account Number: _____ Deduction Start Month: _____

Withdraw On: 5th 15th

Print Name (as shown on your account): _____

Include Enrollment Fee: Yes No (If no please include a separate check with this form)

Signature: _____ Date: _____

Account Information – Credit Card

Accepted Credit Cards (please circle which card you would like to use:

Visa MasterCard Discover

Print Name (as shown on card): _____

Card Number: _____

Expiration Date: _____ Security Code: _____

Deduction Start Month: _____ Withdraw On: 5th 15th

Include Enrollment Fee: Yes No (If no please include a separate check with this form)

Signature: _____ Date: _____

If payment is due on a weekend or holiday Collett Propane will initiate debit next business day