



## AUTOMATIC WITHDRAWAL AUTHORIZATION FORM

*Thank you for choosing natural gas as your energy source!*

PLEASE RETURN THIS SIGNED FORM, ALONG WITH A **CHEQUE MARKED VOID**, AND WE WILL PUT YOU ON OUR PRE-AUTHORIZED WITHDRAWAL SYSTEM NEXT MONTH

I hereby authorize EPCOR Natural Gas L.P. and the Financial Institution noted on my attached VOID cheque, to begin deductions for my automatic withdrawal payment. This authority is to remain in effect until EPCOR Natural Gas L.P. has received notification from me or until EPCOR Natural Gas L.P. has sent a notice of termination.

<b>EPCOR Account #:</b>	<b>Name on EPCOR Account:</b>
<b>Address:</b>	<b>Telephone:</b>
<b>City:</b>	<b>Date:</b>
<b>*Authorized signature 1:</b>	<b>*Authorized signature 2:</b>

\* When more than one signature is required on a cheque, both signatures are required above.

\* At least one name on the cheque must be the same as the name on your gas bill. This helps your bank ensure that the authorization is valid.

<p><b><u>FOR OFFICE USE ONLY</u></b></p> <p>DPAC   <input type="checkbox"/></p> <p>CHANGE IN BANKING INFORMATION   <input type="checkbox"/></p> <p>NEW EPCOR PAC CUSTOMER   <input type="checkbox"/></p>
--