



CITY OF ST GEORGE
 175 E 200 N ST GEORGE UT 84770
 Telephone (435) 627-4700 Fax (435) 627-4731



CREDIT CARD AUTHORIZATION

Every month the City of St George will charge your credit card account for the total amount of your City utility billing. You will continue to receive your City utility billing as you normally would; however, no manual payment will need to be made as **the full amount due will be electronically charged to your credit card on the billing due date.**

As a participant of Credit Card Charging, I agree to and/or understand all of the following:

- Only customers who are current on their utility account are eligible to sign-up and remain on this program.
- **It will take one month to establish this process.** When this process is setup, a message will appear on my bill notifying me of such, until that time I am responsible to pay the bill directly to the City of St. George.
- I authorize the City of St George to charge my credit card for all monthly charges for utility services and any associated fees.
- I will ensure that sufficient credit is available on the card to cover my bill.
- Two refused electronic charges may cancel this agreement at the option of the City of St George.
- **I will promptly notify the City of St George of any change to my card number or expiration date.** If a change occurs it is my responsibility to provide the City of St. George with the current account information.

CREDIT CARD INFORMATION:

Cardholder name: _____

Mailing Address for Credit Card Statement: _____

Credit card number: _____ Master Card _____ VISA _____

Expiration Date: _____ Telephone _____
 Month Year

AUTHORIZATION

I hereby authorize the City of St George to initiate charges to the credit card account indicated above for the purpose of paying my monthly utility bill and any associated fees with the City of St George. **This authority is to remain in full force and effect until I revoke it by giving 15 days prior written notice to the City of St. George, it is canceled by the City under the conditions stated above, or upon termination of my service with the City of St George.** I have also read and agree to the terms and conditions outlined above.

 Card Holder Signature

 Date

 Utility Customer name (please print)

 City Utility Account Number

OFFICE USE ONLY: Customer Service Representative _____ Date _____