uniongas
A Spectra Energy Company

Automatic Payment Plan

SUBMISSIONS MUST BE SENT BY MAIL OR FAX

To enroll in the Automatic Payment Plan, follow these easy steps:

1. Pay your current bill as you normally would.
2. Complete this form.
3. Sign the form.
4. Send the completed form to Union Gas.

Union Gas Limited
P.O. Box 2025
Chatham, Ontario
N7M 6C7

Toll Free Fax:
1-800-799-0039

Fold Here

The Automatic Payment Plan - means you never have to worry about a missed or late payment again! Each month you will receive a bill showing the amount due and the withdrawl date. Your financial institution will automatically transfer this amount to Union Gas. Pay this month's bill as you normally would, and your new plan will be set up within 30 days. If your banking information changes, please be sure to notify us.

**** Required Information***

Date (Yr. / Mo. / Da.) 20 1 ____ ____ ____

***Union Gas Account Number** (Example: 000–0000 000–0000) ____ – ____ ____ – ____

***Name on Union Gas Bill** _____

***Address** _____ **City** _____

***Daytime Phone Number** (_____) _____

The following information can be found on your personal cheques (see sample)

***Bank Branch** _____ ***Bank Account Number** _____

***Financial Institution Name** _____

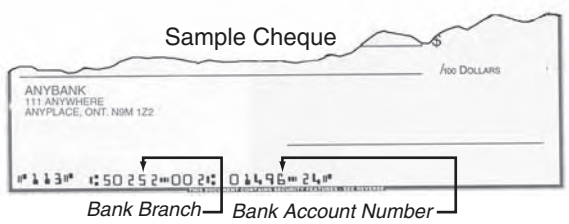
Street _____ City _____

I hereby authorize the financial institution named above to charge my chequing account to pay my monthly Union Gas bill. This authority will remain in effect until Union Gas receives notification from me or until Union Gas sends me notice of termination.

If more than one signature is required on a cheque, then both signatures are required.

***Signature(s)** _____

_____



Please, sign and forward your form by mail or fax.
Union Gas must receive a handwritten signature in order to process your application.