



SUMMARY BILLING ENROLLMENT FORM

Customer Name: _____

Contact: _____
(Must be authorized to make changes on the account.)

Phone Number: _____

Mailing Address: _____
(Where to send the summary bill.)

Accounts to be placed on summary billing are subject to eligibility requirements.
(If you have more accounts, please attach a separate list.)

Account Name	Account Number	Service Address	City	Tax Exempt Y/N?

Signature: _____

Date: _____

Print Name: _____

Please complete and return this form:

Email: SAS@csu.org

Mail: Colorado Springs Utilities
Summary Billing - Mail Code 1339
P.O. Box 1103
Colorado Springs, CO 80947-1339

Fax: (719) 668-7176

Terms & Conditions:

This Summary Billing Agreement is subject to the Rules, Regulations, and Rate Schedules for utilities service on file with Colorado Springs Utilities, as amended from time to time. Except as expressly provided herein, the terms and conditions of existing Contract(s) for utilities service and other Agreement(s), if any, between Colorado Springs Utilities and Customer shall remain in full force and effect. This Agreement will remain in effect until terminated by either party. After official notification has been received, please allow up to two billing periods to add or remove accounts from summary billing. Accounts on contracts may take longer to process to ensure summarizing accounts does not alter agreements. If any customer accounts are on Budget Billing, these accounts will not be eligible for Summary Billing, unless the customer elects to remove them from Budget Billing. Bills are to be paid in full by the due date on the bill. Failure to comply with all conditions may result in the immediate removal of all Customer's accounts from the Program. **If your summary account falls into arrears, any/all of the service locations are subject to discontinuance of service.**