

DUNCAN PUBLIC UTILITIES  
LEVELIZED BILLING REQUEST

---

NAME

---

ADDRESS

---

DPUA ACCOUNT NUMBER

I do hereby request the City of Duncan Public Utilities Authority transfer my account to the Levelized Billing cycle. In making this request, I understand that my account must be paid by bank draft each month regardless of whether my account balance is a debit or a credit. **Any draft returned by your bank could result in your account being removed from the Levelized Billing Cycle.**

At any time, upon proper notification to the City of Duncan, I can be removed from this billing method.

---

SIGNATURE

---

CUSTOMER SERVICE REPRESENTATIVE

---

DATE