



Houston County Electric Cooperative, Inc.

TEXAS 89 HOUSTON

P.O. BOX 52
CROCKETT, TEXAS 75835

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OFFICE: LOOP 304 SE

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1-800-657-2445

BUDGET BILLING AGREEMENT

I/We, _____ Account # _____

do hereby agree to Budget Billing Plan _____

1. A fixed monthly amount, with the actual account balance being billed at the end of the budget period.
2. A fixed month amount, with the account balance at the end of the budget period included in the computation of the budget payment for the following year.
3. A monthly payment based on a average of current plus previous 11 months usage, computed on current rate schedule.
4. A monthly payment based on average of the current month plus previous 11 months of patronage and taxes. Other charges and security lights are billed in addition to the average monthly patronage and taxes.

I/We understand that any other charges for these account(s) will have to be paid according to the collection policies of the Houston County Electric Cooperative, Inc. in addition to the above Budget Billing Plan.

Date: _____

Name: _____

By: _____

Address: _____

Home Phone# _____

Work Phone# _____

“Owned By Those We Serve”