

Lenoir City Service Center 206 Depot Street Lenoir City, TN 37771 FAX: (865) 988-9696

Cedar Bluff Service Center

501 N. Cedar Bluff Road Knoxville, TN 37923 FAX: (865) 693-5631

Farragut Service Center 136 N. Campbell Station Road Knoxville, TN 37934 FAX: (865) 671-4622

Equal Pay Plan Customer Agreement

CUSTOMER INFORMATION							
Last Name			First Name				MI
Address				City		State	ZIP
Home Phone	Cell Phone	Work Phon	Work Phone		LCUB Account Number	Equal Pay	Amount
AUTHORIZATION AND SIGNATURE							
To participate in the Equal Pay Plan Program, I understand that I am required to have lived at my residence for a							
minimum of twelve months of which the average historical monthly expense will be used to determine the Equal Pay							
Amount. This twelve month usage will project an average monthly bill, plus an additional ten percent, which I will pay							
each month until the reconciliation month of August. The additional ten percent is added to the average to allow for							
fluctuation in cost.							
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Every year in August, my account will be reconciled and I agree to pay LCUB the balance of what I owe for the twelve							
month period if an underpayment exists. In the event of an overpayment, I understand that LCUB will credit my account the additional amount paid. During this reconciliation period, LCUB will automatically review and reset my							
Equal Pay Amount using the most recent twelve month history. I also understand that if my initial participation date in							
the Equal Pay Plan is within two months prior to August that my account will not be reconciled until the following							
August.							
If, for any reason, I do not pay the Equal Pay Amount before the gross is applied, I understand that I must pay the							
difference in the gross and net plus my Equal Pay Amount. This difference will not be used during the reconciliation							
month of August. I further understand that continued program eligibility depends on my account remaining current							
and that it can never be more than ten days past due.							
After six months LCLIP may review my assembly if significant increases or decreases in my every ward was a retterned							
After six months, LCUB may review my account. If significant increases or decreases in my overall usage patterns or rates have occurred, then my payment will be adjusted to avoid a large debit or credit balance in August. Because of							
this, I understand that my payment amount may change before the reconciliation month of August. Additionally, if I							
make any changes to or notice any dramatic differences in my utility usage, I understand I must contact LCUB.							
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Lastly, I understand that my account must be paid current before I can enroll in this service and that it will not start							
until the next billing cycle after LCUB receives this agreement. This agreement remains in effect indefinitely until I							
provide a written termination notice to LCUB or LCUB terminates my participation due to ineligibility or violation of this							
participation agreement.							
Date	Sign	nature					
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