



ELECTRONIC BANK DRAFT PLAN

Middle Tennessee Natural Gas Utility District (MTNG) offers its customers the opportunity to pay their natural gas bills by participating in our Bank Draft Payment Plan. Any customer who has a checking/savings account may participate in the plan. You may join the plan by signing the authorization statement below. The service is free and helps ensure against late payment charges from forgetting to pay your bill by the due date. Instead of driving to your local office or mailing your monthly payment, you can save time and money by using Bank Draft.

Customers receive their bill each month as usual. After the first payment by electronic draft, the next bill will indicate "Paid By Bank Draft". Customers may withdraw from the Bank Draft Payment Plan at any time. MTNG reserves the right to terminate any customer's participation if the customer's financial institution fails to honor the authorized drafts.

If you are interested in having your natural gas bill paid by electronic bank draft, please send a copy of your check and the form below to MTNG at the address shown on your latest natural gas bill.

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ELECTRONIC BANK DRAFT AUTHORIZATION FORM

I hereby authorize Middle Tennessee Natural Gas Utility District "MTNG" to initiate debit entries to my checking/savings account indicated below and the financial institution named below to debit the same to such account. I understand the monthly billed amount will be debited from my checking/savings account. Customers may terminate bank draft by written notification, with the notice being in a timely manner to afford MTNG a reasonable amount of time to implement the request before the next billing cycle.

Please attach a voided or cancelled check (a copy is acceptable)

Name as Shown on Financial Institution Records	Branch Name and Location	
City, State, Zip Code of Financial Institution		
Financial Institution Routing Number	Checking / Savings Account Number	
<i>Monthly Billed Amount</i>		
Customer's MTNG Account Number	Amount Authorized	Customer's Monthly Due Date
Customer cell phone - 1	Customer cell phone - 2	Customer email

By checking the box, I am willing to receive emails or text alerts from MTNG. Carrier rates may apply.

Customer Signature _____ Date _____

Please mail form to your local MTNG office or to PO Box 670, Smithville, TN 37166

For more information or for questions, please visit our website: www.mtng.com or email: mtng@mtng.com or call: 800-880-6373