

Utilities District of Western Indiana REMC
1666 West State Road 54
Bloomfield, IN 47424



Prepaid Debt Management

Account Number: _____

Consumer Name(s): _____

Current Address: _____

Location Number: _____ End of Service Date: _____ Amount: _____

Location Number: _____ End of Service Date: _____ Amount: _____

Location Number: _____ End of Service Date: _____ Amount: _____

Total Debt Amount Owed: _____

By signing below, I understand that any payment made on my Prepaid Meter Account will be dispersed as 50% to my Prepaid Electric Account and 50% to my previous outstanding debt owed to UDWI REMC until the balance is paid in full. This will include payments made by Energy Assistance or any other organization.

If the account is disconnected for not maintaining a credit balance, payment must be made to bring the account to a \$50.00 credit. All usage charges through the date of disconnection, \$50.00 to restart the meter, and payment to the debt will be required to reconnect the service. As stated above, any payment made will be applied as 50% to the outstanding debt and 50% to the meter for future use.

I also understand that upon disconnection of my prepaid electric service, if my previous outstanding debt is not paid in full, any remaining credit on the prepaid meter (including the \$25.00 membership fee) will be applied to any remaining balance due.

Consumer Signature: _____ Date: _____

UDWI REMC Representative: _____