

BUDGET PLAN AGREEMENT

The Budget Payment Plan uses your estimated gallons, based on your past 2 year average usage, and is divided into equal monthly payments. (These gallon estimates can be seen on your Propane Price Protection Agreement)

Terms and Conditions

- You must have approved credit terms to be eligible for the Budget Payment Plan
- Current account balance must be paid in full before your Budget Payment Plan can be activated
- Payments are due <u>every</u> month on the 10th of each month (July through May), regardless of actual balance on the account.
- If we do not receive a payment by the last day of the month, you will be removed from the payment plan. If you are removed, your account balance will be due in full within 30 days.
- Budget customers are not guaranteed a set price unless they also have an active Propane Price Protection Agreement.
- June is the settlement month for the Budget Payment Plan. Any unpaid balance will be due in full by June 30th. Overpayments will be calculated into the next budget season total due unless you request a refund of the credit (Refund requests must be received by June 15th).
- Customers, in good standing, will remain on the Budget Payment Plan until the customer notifies Blue Flame Propane Inc in writing that they wish to be removed from the plan.
- Customers will be notified via letter in June of their new monthly payment calculation.

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• GAS CONSUMPTION IS THE CUSTOMERS RESPONSIBILITY – If usage is going to vary significantly from the estimation of gallons, it is the customers responsibility to contact Blue Flame Propane for a budget payment review. Monthly payments may be adjusted at the company's discretion if the price of product or consumption warrants a change.

I would like to take advantage of the Budget Payment Plan and have read the Terms and Conditions listed above and agree to them. I also understand that the above listed Terms and Conditions are in addition to any other Terms and Conditions that I have previously agreed to.

Signed.	Da	lG
Printed Name:		
I would like to	receive a copy of this form	back for my records
Please return signed	orm:	
Fax – (586)727-4311		
Once form is	received and processed your c	delivery office will contact you regarding your monthly payment
Office Use		
Branch:	Account #	Payment Amount: