

Main Office (406) 883-7900

Warehouse Fax (406) 883-7923



NAME ON MVP ACCOUNT \_\_\_\_\_

MVP ACCOUNT NUMBER \_\_\_\_\_ BILL RUN \_\_\_\_\_

MVP LOCATION NUMBER \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

**I AUTHORIZE MISSION VALLEY POWER TO INITIATE THE FOLLOWING**

My bill will be charged to my Credit or Debit Card each month on the Due Date

My monthly bill is to serve as my receipt.

\_\_\_ Credit \_\_\_ Debit

\_\_\_ MASTERCARD \_\_\_ VISA \_\_\_ AMERICAN EXPRESS

Name of person on Credit Card \_\_\_\_\_

Cardholder Address \_\_\_\_\_

Cardholder City, State & Zip: \_\_\_\_\_

Card # \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV \_\_\_\_\_

Authorized Signature \_\_\_\_\_ Date \_\_\_\_\_

It is the customer's responsibility to call and update the credit card information when there is a change of Card # or expiration date. If information is not updated, this could put the account in a delinquent status and may be disconnected

◀ In the event there is a ***Dishonored Payment***, for any reason, there will be a ***\$35.00 handling fee*** added to your account.

◀ In the event of two (2) Denial payment within a twelve (12) month period this authorization will be cancelled.

◀ If you wish to discontinue this program, notify Mission Valley Power.

Contact MVP office for any questions at 406-883-7900 or 406-675-7900.

\_\_\_\_\_  
Customer Service Rep                      Date

\_\_\_\_\_  
Date entered & Initials