

**Save Time, Money, and the Environment by Switching To Paperless Billing with Intellex EZPay.**

**YES! I Want The Convenience of Paperless Billing With Intellex EZPay. Please Discount My Services \$1.00 Per Month.**

Intellex Username: \_\_\_\_\_

Name on Intellex Account: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_

I authorize Intellex to begin deductions from my account with the financial institution named for payment of my Intellex bills. I understand that I have the right to cancel automatic payment of my Intellex bills by providing timely written notice to Intellex and / or my designated financial institution prior to the time my account is charged. I understand that Intellex and / or the financial institution indicated reserve the right to end this payment plan and my participation therein.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**IMPORTANT: PLEASE RETURN A VOIDED CHECK WITH THIS FORM TO ENSURE ACCURATE PROCESSING.**