



DIRECT DEBIT APPLICATION & AGREEMENT

Thank you for your interest in our Direct Debit Program. Please complete this application and sign and mail it to the address below. It may take up to 7 days to process your Direct Debit enrollment, once your completed application has been received. Please include an original voided check. No deposit slips, please.

Name On SoCalGas Account: _____

Service Address: _____

City: _____

Zip: _____

Telephone Number: _____

SoCalGas Account Number: _____

Financial Institution: (Required) _____

Checking Account Number: (Required) _____

*E-mail Address: _____

If you have multiple accounts and would like to add them, please provide each service address and its associated account number on a separate sheet(s) of paper. Attach the additional sheet(s) to this application.

*I would like to receive periodic e-mails from Southern California Gas Company (SoCalGas) about topics such as: assistance programs, energy efficiency, safety, payment options, special promotions, etc.

By signing below, I acknowledge and agree as follows: (a) I authorize SoCalGas and the financial institution I have indicated above to deduct payments for my SoCalGas bill from the above-referenced checking account; (b) I am responsible for paying any associated fees my financial institution may charge (if any); (c) SoCalGas reserves the right to terminate my participation in the Direct Debit payment program for any reason, including, without limitation, if my payment is rejected more than once within a consecutive twelve-month period; (d) SoCalGas may modify or terminate any or all services or the Direct Debit payment program at any time without the obligation to provide notice; (e) SoCalGas has no responsibility for any failure or error with respect to the Direct Debit payment program, including, without limitation, any interruption, omission, mistake, malfunction, or delay related thereto; and (f) no indirect, consequential, punitive or special damages will be assessed against either party in connection with the Direct Debit payment program.

You will receive a confirmation letter that your application has been processed and approved in approximately 2-3 weeks. Your monthly payment will be automatically deducted from your designated checking account ten (10) days after your statement is mailed to you.

Name (Please print as it appears on your check)

SIGNATURE

Mail this application to:
SoCalGas
Electronic Payment Program - ML 711A
PO Box 2007
Monterey Park, CA 91754-0957



PARTICIPATION GUIDELINES

(Please keep a copy for your records)

How does Direct Debit work?

After you enroll in the Direct Debit Program, your monthly payment is automatically deducted from your designated checking account ten (10) days after your statement is mailed to you. The designated checking account you choose will be debited for all charges shown on the bill. Direct Debit payments start within thirty (30) days after your completed application is received. For details, visit socalgas.com.

Who is eligible for Direct Debit?

The Direct Debit Program is open to all residential and business customers (excluding transportation customers billed by an aggregator). Your account must be in good standing, with no existing payment arrangements, and with no more than one check having been returned within the last 12 months.

Is there a fee to participate in the Direct Debit Program?

There is no charge from SoCalGas to participate. However, some financial institutions may charge a transaction fee for electronic fund transfers. Please check with your financial institution regarding any possible fees.

After I am enrolled, how do I change or update my financial institution information?

If you register as a "My Account" online user at socalgas.com you can view and edit your financial institution information. To update or edit such information for Direct Debit, click the "Update Direct Debit Banking Information" link under "Other Services," or you may call SoCalGas at the phone number below.

What happens in the event of a rejected payment?

Payments may be rejected by your financial institution due to insufficient funds, closed/unauthorized accounts, or other reasons. Check with your financial institution for possible fees it may impose. If your payment is rejected, SoCalGas will charge a \$7.50 processing fee on your next natural gas bill. SoCalGas reserves the right to terminate your participation in the Direct Debit Program if your payment is rejected more than once within a consecutive 12-month period.

How do I discontinue my participation in the Direct Debit Program?

You may cancel your participation in Direct Debit by calling SoCalGas toll-free at the phone number below and asking to be removed from Direct Debit. Termination for Direct Debit customers will become effective within fourteen (14) calendar days after we receive your notification.

If you have any questions regarding this form or need assistance, please call 1-800-427-2200. Our Customer Service Representatives are available to assist you Monday - Friday, 7:00 a.m. - 8:00 p.m. and Saturday, 7:00 a.m. - 6:00 p.m.