



# UTILITY BILL PAYMENT AGREEMENT FORM

---

*No one except the person whose name is currently on the account or the legal spouse of said person can request any action on an account.*

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Extended Date Requested: \_\_\_\_\_ Acct #: \_\_\_\_\_

Amount Due: \_\_\_\_\_ Agreement #: \_\_\_\_\_

---

*Payment agreement dates will not be extended past the last day of the next month.*

***NO MORE THAN TWO (2) AGREEMENTS WILL BE GRANTED IN A CALENDAR YEAR.***

---

I, the below signed customer, understand that if this account is permitted to remain delinquent past the extended date, service will be disconnected and I will owe an additional \$75.00 reconnect fee if restored before 4:00 p.m. or an additional \$150.00 reconnect fee if restored after 4:00 p.m.

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

---

**APPROVED BY:**

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