

Payment Plan

Name _____

Address _____

Account Number _____

Phone Number(s) Work _____ Home _____

Email address _____

Current Outstanding Balance \$ _____

I _____ do hereby agree to make the following payments(s).

<u>Payment Date(s)</u>	<u>Payment(s)</u>	<u>Balance</u>
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THE VILLAGE WILL NOT CALL YOU REGARDING THIS NOTICE

I UNDERSTAND THAT MY FAILURE TO MAKE PAYMENT(S) IN FULL, BY THE AGREED DUE DATE(S), WILL RESULT IN THE IMMEDIATE TERMINATION OF MY VILLAGE UTILITES. Once terminated, said utilities will not be restored until all current and outstanding balances and penalty fees are paid in full. If another utility bill or shut-off notice is issued after the date of this Agreement contact the Village Office immediately. If calling to check the status of your account, tell the office staff that you have a "Payment Plan."

Customer's Signature

Date

Village Witness

Date