

APPLICANT CERTIFICATION:

I understand that by submitting this agreement:

1. A Payment Plan is not guaranteed;
2. Should I be granted a payment plan. Extensions to pay will not be granted for longer than a six (6) month period;
3. Should payment not be paid in full, prior to the end of the agreed upon extension, I will face penalty and face shut off of water service due to nonpayment.

_____ Date: ____/____/____

- Office Use Only -

The Common Council convened on ____/____/____ and reviewed the Payment Plan Request submitted by: _____
 _____ for property located at _____

The Common Council has made the following determination:

Payment arrangements granted? YES NO

Conditions of payment agreement or reason for denial:

Council Member at Large: _____ Date: ____/____/____

City Attorney: _____ Date: ____/____/____

City Treasurer: _____ Date: ____/____/____