

COVID-19

of Scheduled payments _____

Agreement complete _____

TOWN OF RANLO, NC
UTILITY DEPARTMENT

_____ OF 3

Agreement to pay all past due utility bills owed to the
Town of Ranlo, NC

DATE _____ ACCOUNT # _____ AMOUNT \$ _____

NAME ON ACCOUNT _____

SERVICE ADDRESS _____

I HEREBY AGREE THAT I WILL PAY MY PAST DUE UTILITY BILL/S AS FOLLOWS:

AMOUNT PAID TODAY \$ _____

NEW BALANCE \$ _____

I AGREE TO PAY \$ _____ ON THE **15TH** OF EACH MONTH UNTIL THE ENTIRE BALANCE HAS BEEN PAID. THE FIRST PAYMENT ON THIS AGREEMENT IS DUE ON /15/ .

I UNDERSTAND THAT I MUST KEEP MY CURRENT BILL PAID EACH MONTH BY THE 15TH TO AVOID DISCONNECTION OF MY SERVICE AND A RECONNECTION FEE OF \$50.00. I ALSO UNDERSTAND THAT THERE WILL BE A \$5.00 LATE FEE APPLIED TO ANY BALANCE REMAINING AFTER THE 15TH OF EACH MONTH. IF SERVICE IS DISCONNECTED DUE TO FAILURE TO HONOR THIS AGREEMENT THE TOTAL AMOUNT OF THE AGREEMENT PLUS A \$50.00 RECONNECT FEE WILL BE REQUIRED TO RESTORE SERVICE. *IF YOU CALL AFTER 5:00PM, AN AFTER HOURS RECONNECT FEE OF \$30.00 WILL ALSO BE REQUIRED. ALL AFTERHOURS PAYMENTS MUST BE MADE BY CHECK, MONEY ORDER OR ONLINE (you must print receipt for online payments). No cash accepted after hours.*

UTILITIES CUSTOMERS ARE ALLOWED THREE (3) AGREEMENTS PER YEAR BEGINNING WITH THE FIRST AGREEMENT.

SIGNED BY: _____ DATE _____ CLERK: _____

PAYMENT RECORD ON PAST DUE AMOUNT

BAL

1. AMOUNT DUE: _____	ON _____	PAID _____	\$ _____
2. AMOUNT DUE: _____	ON _____	PAID _____	\$ _____
3. AMOUNT DUE: _____	ON _____	PAID _____	\$ _____
4. AMOUNT DUE: _____	ON _____	PAID _____	\$ _____
5. AMOUNT DUE: _____	ON _____	PAID _____	\$ _____