



The Village of
North Fond du Lac
...A Great Place to Live, Work & Play

UTILITY BILLING PAYMENT PLAN

Customer Number:

Customer Name:

Service Address:

Telephone No.

Balance Due:

Payment Arrangement:

Date: _____ Amount: _____ Date: _____ Amount: _____

Total: _____

**** Amounts of \$50.00 or less must be paid in full, no deferred payments. ****
Minimum payment must be at least 1/3 of balance due.

Payment Agreement: All past due balances must be paid in full by _____.

Please be advised that failure to keep the above agreement as stated will result in immediate disconnection of water service.

- **You have the right to suggest a different payment agreement.**
- **If you believe the terms of this agreement are unreasonable, DO NOT SIGN IT.**
- **If you and the utility cannot agree on terms, you may ask the commission to review the disputed issues.**
- **If you sign this agreement, you agree that you owe the amount due under the agreement.**
- **Signing this agreement does not affect your responsibility to pay for your current service. Allowing any bill for current services to become delinquent places you in default of this agreement.**

Signed: _____ **Date:** _____