



**EXTENDED PAYMENT AGREEMENT**

The undersigned, as the person responsible for the payment of the account(s) described herein, covenants, acknowledges and agrees as follows:

1. That customer account number \_\_\_\_\_ is requesting an extension for payment of their account due to hardship. The account is currently past due in the amount of \$\_\_\_\_\_.
2. **That the amount of \$\_\_\_\_\_ will be paid by the 11th/21st of each month in addition to the current monthly bill.**
3. That if the total amount is not paid in full on or before \_\_\_\_\_ the District may proceed with all of its legal and equitable remedies, pursuant to state statutes and District policies and procedures, without further notice, including shut off of services.
4. That if any payment pursuant to this Agreement, or any other payment which may be due to the District, now or in the future, is not paid when due, this Agreement shall automatically expire and the District may proceed with all of its legal and equitable remedies, pursuant to state statute and District policies and procedures, without further notice.

DATED: \_\_\_\_\_

SIGNED BY:

\_\_\_\_\_

APPROVED BY:

\_\_\_\_\_  
LEFT HAND WATER DISTRICT  
Kathryn Peterson  
District Manager