City of McAlester

Water Utility Payment Plan Contract

Utility Account # _____ **Date Requested** _____

- **First Name** _____
- **Last Name** _____
- **Service Address** _____
- **Mailing Address** _____
- **Phone Home** _____ **Cell** _____ **Work** _____ **Ext**_____
- **Email** _____

Is the reason you are unable to pay relate to Covid –19? Yes _____ No _____

Reason you are unable to Pay (please select or explain)

___ Business Closed ___ Job loss ___ Layoff ___ Leak ___ Other (if other specify)

_____

_____

Payment Plan Requested: A Payment Plan Contract is an agreement to pay the previous balance in monthly installments (12 months maximum) plus each regular monthly bill.

I am requesting the Utility office accept a monthly payment of $ _____ on past due charges. This amount does **not** include my regular monthly bill.

Beginning Date _____ Number of Months Requesting _____

IMPORTANT INFORMATION:
You will be notified by customer service regarding this matter once approved. You will continue to be billed each month. We encourage you to make your regular payments. A late or missed payment will cause your agreement to go into default. Once in default the entire past due balance will become due, or service disconnected. If your service is disconnected, it shall be reconnected only upon payment of all past charges and reconnection fees. If you move prior to your contract being fulfilled, you will be required to pay the remaining balance in full prior to new service.
By signing below, you certify that all information on this form is accurate and complete.

Signature: _____

Utility Office Signature: _____

Date Approved/Denied _____