Account #_____

Extension Agreement

The purpose of this agreement is to provide a Water Bill payment extension to Members of Hudson Water Supply Corporation. The total amount due must be paid by due date to avoid interruption of services. Since the owner of the property is ultimately responsible for water bills, extensions to pay CANNOT be provided without their permission. To be eligible for an extension to pay, a payment must have been received during the previous 30 days or a payment must be made with the extension request. (Tenants are responsible for contacting property owners for extension approval). Agreement must be received and approved 48 hours before cut-off date. NO EXTENSIONS will be given on cut off date.

Acct Number:_____ **Service Address_____**

Member Name: _____ Photo ID #_____ Phone #_____

Extension Date: _____ **Amount to be paid: _____**

Notes: _____

_____

By signing below, I am stating that I understand the following:

If the balance is not **PAID IN FULL** as agreed, my service will be disconnected without any additional notices and a $50.00 fee will be added to my account. If service is disconnected due to non-payment of an extension, service will not be reconnected until paid in full. A responsible party must be present when water is reconnected since Hudson Water Supply can assume NO liability for damages caused by open faucets, leaks, etc. Reconnection on the same day as payment is not guaranteed.

I will still receive a bill for current charges that will be due on the 10th of next month. **THIS AGREEMENT OVERRIDES THE DUE DATE ON ANY BILL OR NOTICE RECEIVED AFTER SIGNING THIS AGREEMENT.** Failure to pay per the arranged terms of the extension agreement will result in no further payment extensions on the account within twelve (12) months of the date of the broken extension agreement. No additional time will be given on an extension to pay.

I have read the above agreement and understand that if the terms and conditions of this contract are not met, services will be interrupted on the day following the due date.

_____ _____

Member Signature **Date**

_____ _____

Tenant Signature **Date**

RENTAL PROPERTY ONLY (to be signed by property owner)

I _____understand I am fully responsible for any outstanding bills, fees and charges on this account that are not paid by tenant. ***<u>NO ADJUSTMENTS GIVEN ON RENTAL PROPERTY.</u>**

_____ _____

MEMBER SIGNATURE **DATE**