



CITY OF RENSSELAER

RENSSELAER, INDIANA

PAYMENT AGREEMENT

CUSTOMER INFORMATION		
Customer Name:		
Service Address:		
SSN:	Driver License #:	DOB:
Phone #:	Alternate #:	
Email Address:		
PAYMENT AGREEMENT		
Payment Amount:	Payment Date:	
TERMS OF AGREEMENT		
<p>_____ I agree to pay the past due balance on or before the agreed upon payment date.</p>		
<p>If the payment amount is not paid in full by the aforementioned date, all utility services are subject to discontinuation of service and additional delinquency fees. If services are not reconnected within 7 days, the account will be closed and meter _____ deposits applied to the final invoice.</p>		
<p>Should the account become delinquent and require collection efforts, this information may be shared with Online Utility Exchange. Furthermore, if legal action is necessary to collect amount due under the account, the customer _____ consents to the jurisdiction of the Jasper County, Indiana courts.</p>		
Customer Signature:		Date:
Authorized User [Print Name]:		Date:
Authorized User [Signature]:		
For Office Use Only:		
Account #:	Account Balance:	
Clerk initials and date completed		
Scanned:	CUBIC:	Laserfiche: