## MANCHESTER UTILITIES AUTHORITY DEFERRED PAYMENT AGREEMENT – COVID-19 Public Health Emergency

Name on the Account:	Account No.:  Telephone No.:			
Service Address:				
<b>Total Amount of Arrears:</b>				
Payment Due Date	Agreed Amount Due	Date Paid	Remaining Balance	
				_
	+			
				1
Such installment payment by the dates listed.	s are <b>in addition to the amour</b>	nt of any current water b	<b>pills</b> and must be paid promptly	as agreed above
•	ficient funds will be considered in full, including a <mark>\$250.00</mark> rec		•	
current bill by the due date of this agreement and yo	ed Payment Agreement and fa e, your service will be subject to ur service is disconnected, it s osit may also be required to e	o disconnection upon ten	n days written notice. If you def aly upon payment of <b>all past</b> (	ault on the terms
you sign this agreement, y	th this agreement, DO NOT SI you agree that you owe the am for your current service. <i>Allow</i> al	ount due under this agre	eement. Signing this agreemer	nt does not affect
I HAVE READ THE ABOVE DOCU	JMENT AND WILL ABIDE BY THE TER	RMS OF THE PAYMENT AGRE	EMENT.	
		Customer Signature	Date	
This agreement is accepted by	the Manchester Utilities Authority t	his day of	, 20	
		Water Hillity Repress	Water Litility Representative	