**Water Company Letterhead**

**P O Box 1234**

**City, WA 998**

**(555) 123-4567**

9/10/2020

CUSTOMER NAME

CUSTOMER ADDRESS

City WA 998

Dear CUSTOMER NAME:

Account Number # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

We have agreed to accept payment arrangements for your past due water balance of $\_\_\_\_\_, outlined in the payment schedule below. This payment will be in addition to your regular monthly/bi-monthly charges. The past due balance must be paid off in \_\_\_ monthly/bi-monthly payments, of $\_\_\_\_\_ with a final payment amount of $\_\_\_\_\_\_ for a total of $\_\_\_\_\_. You will not be charged any interest on past due amounts or receive a shut off notice when the payment schedule is followed. If your financial condition changes in a way that causes you miss a payment on your payment plan, contact the company immediately.

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| --- | --- | --- |
| **Date Payment is Due** | **Payment Amount** | **Date Received** |
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| **Total Due:** |  |  |

Sincerely,

Manager Water Company

**Failure to comply with the terms of this payment schedule may subject your account to further action, up to and including disconnection. Please contact the company If you experience difficulty or if conditions change.**