

CITY OF SELMA
UTILITY BILL PAYMENT EXTENSION REQUEST

NO ONE EXCEPT THE PERSON WHOSE NAME IS CURRENTLY ON THE ACCOUNT OR THE LEGAL SPOUSE OF SAID PERSON CAN QUEST ANY ACTION ON AN ACCOUNT.
Sec. 62-175 requires that written extensions be filled no later than the 20th day of the month in which the bill is due.

NAME: _____ PHONE: _____

SERVICE ADDRESS: _____

EXTENDED DATE REQUESTED: _____ TIME: _____

E-MAIL ADDRESS: _____

AMOUNT DUE: \$ _____ **ACCOUNT #:** _____

EXTENSIONS WILL NOT EXCEED TEN (10) DAYS PAST THE TURN OFF DATE. NO MORE THAN TWO (2) EXTENSIONS WILL BE GRANTED IN A CALENDAR YEAR.

I, THE BELOW SIGNED CUSTOMER, UNDERSTAND THAT IF THIS ACCOUNT IS PERMITTED TO REMAIN DELINQUENT PAST THE EXTENDED TIME AND DATE, SERVICE WILL BE DISCONNECTED AND I WILL OWE AN ADDITIONAL \$30.00 DISCONNECT FEE BEFORE SERVICE WILL BE RESTORED.

SIGNATURE: _____ DATE: _____

(OFFICE US ONLY)

Your account was granted a payment extension, to be paid by DATE: _____
TIME: _____. Payment has not been received.

SERVICE IS HEREBY TERMINATED.

Your past due amount must be paid plus a \$30.00 disconnect fee before service will be restored.

TOTAL AMOUNT DUE: \$ _____

FORM: UB 2

You may also E-mail or Fax this form in 210-651-0385
PHONE: (210)651-6661 OPT 2 UTILITIES@ci.selma.tx.us