



“A Dream Worth Dreaming”

MAYOR
W. EDDIE REYNOLDS

COMMISSIONERS
GENE ANDERSON, MAYOR PRO-TEM
KAY CAGLE KINCH
DUTCH ANLIKER
BARRY JACKSON
LASHAUNDA RYAN

TOWN MANAGER
BRANDON HOLLAND
ICMA-CM

TOWN CLERK
LAURA B. MORTON
CMC, NCCMC

Town of Biscoe Payment Plan Agreement

Payment Agreement

Date of Agreement: _____

Due Date of Repayment: _____

Total Amount Due: _____

Amount to be paid per month: _____
(this does not include the current month's bill which will also be due at the time of payment)

Terms of Agreement

I, _____, am unable to pay my Town of Biscoe Utility Bill in full at this time due to a
(Print Name)
water leak at _____
(Service Address)

I understand that failure to pay as stated will result in my water being disconnected and reconnection* will not be made until the full amount owed, plus a \$35.00 delinquency fee is paid.

*Reconnections are only made Monday thru Friday before 2:30 pm.

Signed

_____	_____
Customer's Signature	Date

Customer's Printed Name	
_____	_____
Approved by Signature	Date

Approved by Title	