

## RURAL WATER DISTRICT NO. 6, GARVIN COUNTY P.O. BOX 636 WYNNEWOOD, OK. 73098 PHONE (405) 665-4436 FAX (405) 665-4130

## AGREEMENT FOR DEFERRED PAYMENT

Account Name:	Account No.:	
I hereby acknowledge that my accou	ant for water service with the Rural W	ater District No.
6 has a leak balance in the amount of \$	I will be allo	wed to make 12
monthly installment payments to clear the b	palance. I hereby pay \$	, and agree
to make a payment of \$	by the 15 <sup>th</sup> of the each month	beginning the
Month of	for as long as an outstanding	balance remains
or 12 months whichever is less.		
If leak payment, plus the current	bill is not paid by the 15 <sup>th</sup> of the mo	onth the meter
will be locked and full payment plus the	reconnect charge and penalty for re	emaining
balance of the leak will be due before ser	vice is reinstated.	
bill by the 15 <sup>th</sup> of the month. I understand that, if I fail to make	e payments by the 15 <sup>th</sup> of the month	as agreed
herein, the Rural Water District No. 6, G	arvin County, at its option, may de	clare this
agreement null and void upon the first m	issed payment and proceed to disco	onnect my
water service within.		
APPROVED BY:	Date	
District Representative	Customer Name	
•		
	Address	