

Account# _____

Bruceville-Eddy Water Supply Extension Agreement

***This extension must be applied for on or before the 15th of the billing month
and must be approved by:
The City Administrator, Finance Director or City Secretary***

I am hereby requesting an extension of time to pay my Water Bill

Name on Account: _____

Service Address: _____

Phone #: _____

I understand that my extension cannot exceed past the 25th of the month

I will pay my full balance on: _____

***A \$30.00 Re-Connection Fee will be charged if disconnected and must be paid
before water service is restored***

Customer Signature: _____

Date: _____

Authorized By: _____

Date: _____