

UTILITY CUSTOMER SERVICE  
 201 WEST CHACO  
 AZTEC, NEW MEXICO 87410



OFFICE: (505) 334-7670  
 FAX: (505) 334-7679

**PAYMENT ARRANGEMENTS**

DATE \_\_\_\_\_ PHONE# \_\_\_\_\_ (WORK#) \_\_\_\_\_  
 CUSTOMER NAME \_\_\_\_\_ ACCT# \_\_\_\_\_  
 SERVICE ADDRESS \_\_\_\_\_ MAILING \_\_\_\_\_

The customer understands that this payment agreement is solely for their convenience. If the customer cannot keep the agreement, it is their responsibility to obtain other financing. *If customer fails to meet extension agreements twice, the City will not allow further payment extensions to be made.*

- I, the customer named above, agree that, as of this date, the below figure represents a true and accurate past due balance of my utility account. I agree to make full payment for my current monthly bill on or before the due date while I am making payments on my delinquent balance.
- I agree to make the following payments for my balance:

AMOUNT	DATE DUE	AMOUNT PAID	DATE PAID	BALANCE
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

3. I understand that if I do not make the above payments on schedule, my utility service will be **disconnected without prior notice** by the City of Aztec.

**PAST DUE PAYMENTS MUST BE PAID BY THE 20<sup>TH</sup> OF THE FOLLOWING MONTH THAT IS WAS DUE – NO EXCEPTIONS!**

Customer Signature \_\_\_\_\_ Date \_\_\_\_\_ Utility Department Representative \_\_\_\_\_ Date \_\_\_\_\_

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 Utility Department Use Only

Notes: \_\_\_\_\_  
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