



**CITY OF BLAIR
218 S 16th ST BLAIR NE
REQUEST FOR EXTENSION
FOR WATER BILLS**

NAME: _____

ADDRESS: _____

DAYTIME PHONE #: _____

ACCOUNT # _____

**PAYMENT
DUE BY
4:30 PM**

I am requesting an extension of time for the payment of my water bill due

**THIS APPROVED FORM WILL EXTEND THE PAYMENT DATE TO A DATE
NOT LATER THAN 7 DAYS FROM THE DATE SHOWN ON THE
DISCONNECT LETTER.
ONLY ONE EXTENSION WILL BE GRANTED EACH MONTH.**

This bill in the amount of _____ will be paid in full on _____ by
4:30 PM Payment must be made at the counter. NOT IN THE DROP BOX

Signed: _____

Approved by: _____

Date: _____

* This agreement is not valid unless approved by City of Blair staff.

* Service will be discontinued and late fee/disconnect fees will be applied if the bill is not paid on the agreed date and time.

* If the request is emailed in, the request will not be valid until the customer receives a confirmation email, including the approved copy returned to them for their records.