



**City of Ridgefield
Utility Department**

Name _____ Account # _____

Address _____ Amount of bill _____

I agree that the above utility bill is past due. However, I am
unable to pay the full amount today. I agree to pay \$_____ to the
City of Ridgefield on _____, to make a payment of \$_____ on
_____ and the balance of \$_____ on _____.

I understand that if I fail to pay the above installment amount(s), in the time
specified, my water service will be terminated, effective the next business
day after installment was due.

Date: _____ Signature: _____

Reason for hardship request:

Accepted and approved by: _____ Date: _____
Steven R. Wall, Public Works Director