

## MOUNTAIN LAKE MUNICIPAL UTILITIES

P.O. BOX C, 930 THIRD AVE., MOUNTAIN LAKE, MN 56159 (507) 427- 2999 EXT. 6, FAX (507) 427-3327

## REQUEST FOR INSTALLMENT PAYMENT OF DELINQUENT UTILITY FEES

Customer Name:	Address:
Phone:	Alternate Phone:
Account #:	Email:
Total Bill: \$	When will remaining bill be paid? Date(s) required.
Paid Today: \$	
Remaining: \$	
I,	, agree to pay to Mountain Lake Municipal Utilities, the sum
of \$ (total :	remaining bill) for unpaid utility services in addition to new monthly
bills. This amount shall be pa	id on the date(s) as stated above, until the full amount of the balance
is paid in full. In the event of	of non-payment, utility services will be discontinued, and I will be
-	nd costs of collection of the unpaid balance, as well as a \$25.00
1 1	fee, a \$25.00 disconnect fee, and a \$25.00 re-connect fee.
Office Manager (507- indicated will be cause 2. Customers must pay be 3. Checks returned unco 4. Customer is responsibe 5. The agreement MUST member to take effect  This document is a legally	gements must be made with the Mountain Lake Municipal Utilities 427-2999 ext. 6). Any payment not received by the date(s) e for utility service to be shut off the next business day. by cash, check, online, or money order. llectible will result in immediate shut-off. ble for timely payments; no notices will be sent. The be signed by the customer and approved by a MLMU staff
Customer Signature	Mountain Lake Municipal Utilities Authorized Signature
Date:	Date Approved: