



CLARK COUNTY  
OHIO

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Utilities

**Payment Arrangement**

I \_\_\_\_\_ residing at \_\_\_\_\_  
agree to pay the current bill plus \_\_\_\_\_ each month by the scheduled due date and will have  
the bill paid in full by \_\_\_\_\_.

I understand that failure to comply with these arrangements will result in termination of water/sewer  
service and all late charges and delinquency fees will be applied to the account. I understand that late fees  
may be waived as long as payment arrangements are kept and payments are posted to the account by the  
scheduled due date each month.

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Signature

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Date