

McCoy Water Supply Corporation

2125 FM 541

McCoy, Texas 78113

Office #830-569-5575/Fax #830-569-5576

Payment MUST BE Made in the McCoy Office ONLY

Payment Extension

Account # _____

Name of Account: _____

I hereby agree to pay the *Amount* of \$ _____ for a period of _____ months,

included will be a **Monthly Late Fee of \$15** along with my *regular monthly water bill*. I understand that failure to pay by "Final Day" under the terms detailed below will result in the disconnection of my water service with an additional reconnect fee of \$75.

Customer's Signature	Date	Approval of Office or General Mgr.
1 st \$ _____ & \$15.00 = \$ _____	4 th \$ _____ & \$15.00 = \$ _____	
2 nd \$ _____ & \$15.00 = \$ _____	5 th \$ _____ & \$15.00 = \$ _____	
3 rd \$ _____ & \$15.00 = \$ _____	6 th \$ _____ & \$15.00 = \$ _____	

Payment Arrangement

Account # _____

Name of Account: _____

I hereby agree to pay the amount of \$ _____ (this balance includes the **Monthly Late fee of \$15**) no later than the following date and time:

Date: _____ **time:** _____

Failure to pay by terms detailed above will result in the disconnection of my water service with an additional reconnect fee of \$75.

Customer's Signature	Date	Approval of Office or General Mgr.
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