

Office: 318-949-9401

Kim Gaspard
Mayor



Fax: 318-949-2609

Misty Pee
Town Clerk

TOWN OF HAUGHTON
P.O. BOX 729
HAUGHTON, LA 71037

EXTENSION REQUEST FORM

1. No one except the person whose name is on the account or the legal spouse of said person can request any action on an account.
2. Extensions cannot exceed ten (10) days past the turn off date.
3. Amount extended cannot exceed deposit amount on file.
4. Request has to be received prior to the 20th of the month.
5. No more than one (1) extension will be granted per calendar year.

Instructions: To request an extension to pay your utility bill, complete the information below and return this form to the Town of Haughton via any of the following methods.

<i>In Person</i>	<i>Mail</i>	<i>Fax</i>
Town Hall 118 W. McKinley Ave. Haughton, LA 71037	Town of Haughton P.O. Box 729 Haughton, LA 71037	318-949-2609 Attn: Water Dept.

Account Name: _____

Service Address: _____

Phone: _____ Bill Amount: \$ _____ Extended Date: _____

Please Initial Each Line:

_____ I understand that if I fail to pay the full balance by the above-mentioned date, I am subject to the immediate cutoff without further notification.

_____ I understand I am allowed only **one** extension per calendar year. I understand that under **NO** circumstances will an extension be granted on this extension.

I hereby request that the Town of Haughton delay without penalty the payment date of my water bill.

Signature: _____

Date: _____

***** FOR OFFICE USE ONLY *****

Account Number: _____

Approved: _____ Denied: _____

Reason for Denial: _____

Customer Contacted: ___ by Phone ___ In Person