



TONOPAH PUBLIC UTILITIES

140 S. MAIN STREET
POST OFFICE BOX 151
TONOPAH, NEVADA 89049
(775) 482-6643

DEFERRED PAYMENT PLAN AGREEMENT

CUSTOMER NAME: _____

CO-APPLICANT (IF APPLICABLE): _____

TPU ACCOUNT NUMBER: _____

SERVICE ADDRESS: _____

I AGREE TO MAKE EQUAL INSTALLMENTS ON THE DEFERRED BALANCE FOR THE PERIOD INDICATED IN ADDITION TO CURRENT MONTHLY CHARGES BILLED UNTIL THE DEFERRED BALANCE IS PAID IN FULL.

I UNDERSTAND THAT **MY PAYMENTS MUST BE RECEIVED NO LATER THAN 5:00 PM ON THE 18TH OF EACH MONTH**, OR THE FOLLOWING BUSINESS DAY IF THE 18TH FALLS ON A WEEKEND OR HOLIDAY.

I FURTHER ACKNOWLEDGE THAT IF I DEFAULT ON THIS AGREEMENT, MY SERVICE WILL BE SHUT OFF, A \$25.00 SHUT-OFF FEE WILL BE APPLIED TO MY ACCOUNT, AND THE ENTIRE BALANCE WILL BECOME DUE IMMEDIATELY. DEFAULTING ON THIS AGREEMENT WILL MAKE ME INELIGIBLE FOR A DEFERRED PAYMENT PLAN FOR A MINIMUM OF 12 MONTHS ON ALL ACCOUNTS HELD IN MY NAME.

TO BE COMPLETED BY TPU PERSONNEL:

THE DEFERRED PAYMENT PLAN SHALL BE FOR A PERIOD OF: _____ (NOT TO EXCEED SIX MONTHS)

AMOUNT DEFERRED: \$ _____ MONTHLY DEFERRED PAYMENT AMOUNT: \$ _____

CUSTOMER ACKNOWLEDGEMENTS:

I certify that I am the account holder of record with the Utility and fully understand the terms of this agreement acknowledge that my account will be permanently closed. I understand that should service be interrupted due to non-payment of this agreement, service will not be restored until all past due charges, fees and penalties are paid in full.

Customer's Name (Please Print)

Signature

Date