



Request for Extension of Payment

The maximum extended time given will be seven (7) days from the cutoff date. An extension is a privilege and will be based on customer need & circumstances. An extension will not be guaranteed and may be denied for excessive abuse. This agreement must be signed and returned to the Town of Stedman either in person or via email two (2) days prior to the scheduled cutoff date. Upon approval of extension, the late fee will still be applied to the account. If sending request via email, call to confirm that request was received.

I, _____ understand that my past due balance plus the late fee is due by _____. If the past due balance plus the late fee is not paid by _____, services will be disconnected without further notice.

Account number: _____

Service Address: _____

Signature: _____

Date: _____

5110 Front Street/PO Box 220 Stedman NC 28391 Phone: (910)323-1892 Fax: (910)323-4255
Request can be emailed to: wbarlow@townofstedman.com