

**Juneau Utility Commission
DEFERRED PAYMENT AGREEMENT**

Name: _____

Phone Numbers:
Please indicate C=Cell Phone
H=Home
W=Work

Address: _____

Account#: _____

I agree to pay:

Total Due: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

\$ Amount: _____

Date: _____

Signed: _____

Dated: _____

Notes:

