



VILLAGE OF SAUGERTIES Water & Sewer Dept.
43 PARTITION STREET SAUGERTIES, N.Y. 12477
PHONE: 845-246-8958 FAX: 845-246-0887

Water/Sewer Account _____ CID _____

Owner/Bill to Name _____

Service Address _____, Saugerties NY 12477

Billing Address _____

Best Phone # for Contact _____

Email Address _____

Balance Owed as of _____ \$ _____

Amount I agree to pay monthly/weekly \$ _____ beginning _____

_____ The above amount noted is fixed and will be paid as noted.

_____ The above amount will be paid in addition to new bills after this agreement is signed.

By signing below, I acknowledge that I will be responsible to pay this bill in full, along with bills generated after this agreement is approved. Once this agreement ends, I must continue to pay the balance in full or make a new payment agreement.

All interest and penalties will be forgiven during the agreement period. I will make the payments as noted above and should I need to skip a payment I will call or email.

If I default on this agreement in any way, without prior contact with the Village Office, the full balance will be added to my next tax bill.

Payments of cash, checks & credit cards (fees charged, see below) accepted at 43 Partition St., Saugerties NY 12477 in person or by mail or Online at : <https://vosws.authoritypay.com/> (ach with checking or saving FREE, credit cards are 2.5%, \$1.50 minimum)

Signature _____ Date _____

Approved on _____ by _____

A copy will be emailed or mailed to you once this form is returned and approved