

AURORA WATER DEPARTMENT  
905 13<sup>TH</sup> STREET  
AURORA, NE  
68818-2409  
(402) 694-6992

I, (NAME) \_\_\_\_\_  
(ADDRESS) \_\_\_\_\_

(ACCOUNT NUMBER) \_\_\_\_\_ (TELEPHONE NUMBER) \_\_\_\_\_

Promise to pay the Aurora Water Department the total amount of \$ \_\_\_\_\_ on  
The \_\_\_\_ day of \_\_\_\_\_, 2020.

My promise is made in consideration of the City of Aurora's willingness to grant me an extension on my delinquent bill. All bills paid after the 10<sup>th</sup> of the month will be subject to the total bill becoming dues plus ten (10%) percent. **If payment is not made by the contracted date, this agreement is null and void and disconnection will be made with a charge of \$30.00 plus tax added for reconnection.**

This agreement signed and dated this \_\_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Customer

\_\_\_\_\_  
Barbra J. Mikkelsen  
City Clerk/Treasurer

ON OR BEFORE THE 10<sup>TH</sup> OF \_\_\_\_\_, 2020, \$ \_\_\_\_\_.