

Mail:

PO Box 1390

In Person:

105 Sibley St

## UTILITY ACCOUNT EXTENSION APPLICATION

- Only the account holder or legal spouse of the account holder may take any action on a utility account.
- Extension cannot exceed ten (10) days past the disconnect date.
- The account balance requested to be extended cannot exceed the account deposit amount. (A payment equaling the difference will be required before an extension can be granted)

Bentonla.utilities@bentonla.org

Fax:

318-965-2577

Complete and sign the application and return this form to the Town of Benton Water Department via one of the following:

Email:

Benton	Benton, La 71006		
First Name Street Address		Last Name	<del>_</del>
		Phone Number	<u> </u>
Extension Date Requesting		Account Balance	<u> </u>
Read and Initial	the following:		
	derstand that if I fail t ted without further no	o pay the entire balance listed tice.	above, the service
I und	derstand that I will stil	l be charged a late charge of 1	0% of the balance.
Signature		Date	
	For	office use only	
		Approved	Denied
Account Number			
Reason denied:			
Date Posted	Employee In	itials	