

The Potter's House

Saluda

Utility Assistance Form

Your name: _____

Phone number: _____

Service Address: _____

The attached bill covers _____ to _____ and is a one month billing period.

The attached bill is/was due on _____ (month/day/year)

The one month amount charges being paid from this bill are for (check one):

current month's utilities

past due utilities

The amount being paid of \$ _____ is for the month of _____ which is due on _____ and does not exceed one month's billing.

If you have any questions about this application or our utilities assistance program, please call us at **(864) 554-0928**.