



Merrimac Water Dept.

4 School Street

Merrimac, Massachusetts

Telephone: (978) 346-8407

Fax: (978) 346-8407

Payment Plan

Name _____ Phone # _____

Address _____

Account # _____

Total Balance Due _____

Monthly Payment _____

Weekly Payment _____

Payments must cover CURRENT quarterly charges PLUS payment towards arrears.

I agree to make payment in the amount stated above. Payment to be made either on a weekly or monthly basis. If weekly, I agree that the Merrimac Water and Sewer Department will have payment by _____ of each week. If monthly, I agree the Merrimac Water and Sewer Department will receive payment by the _____ of each month. Terms of the payments will depend on the balance of the account and ability to pay.

Water and Sewer Department Representative

Customer

Date