



**BROOKTRAILS TOWNSHIP  
COMMUNITY SERVICES DISTRICT**

24860 Birch Street  
Willits, California 95490  
Phone: 707-459-2494  
Fax: 707-459-0358  
btcsd@btcsd.org

***Application for Payment Plan***

*Complete this form in its entirety and contact the District office with any questions.*

**This confirms that I am aware that the Brooktrails Township Community Services District has a policy that permits water and sewer system customers who are in arrears to enter into a Payment Plan to which the customer must strictly adhere. Failure to adhere to the Payment Plan may result in termination of services until the arrears are paid and could result in placement of a lien against the property until it is satisfied. I also understand that all ‘current’ charges must be paid by the due date and that failure to do so will void the payment plan agreement.**

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Total amount to be paid under the Plan: \$

Customer Account Number:

Select one of the payment schedules listed below:

- Weekly
- Bi-Weekly
- Monthly
- Other \_\_\_\_\_

I agree to pay \$\_\_\_\_\_ every \_\_\_\_\_ on the \_\_\_\_\_ day of the payment period.

*Example (use to develop specific Plan with customer):*

*I agree to pay \$100.00 every two weeks by the 4<sup>th</sup> day of each payment period.*

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I, \_\_\_\_\_, hereby consent to follow the Payment Plan given above with strict abidance.

I have read and understood the conditions of the Plan; should I have any difficulties, I fully accept it as my responsibility to report them to the Brooktrails Township Community Services District before my next payment is to be made to make alternate arrangements.

Customer Printed Name(s): \_\_\_\_\_

Signature(s): \_\_\_\_\_

Date: \_\_\_\_\_

Witness: \_\_\_\_\_

Date: \_\_\_\_\_

## ***Property Owner Consent and Payment Plan Agreement***

I, \_\_\_\_\_, as the property owner/agent hereby consent to the payment plan proposed by and for my tenant, \_\_\_\_\_.

I have read and understood the conditions of the plan; I further understand that as the property owner, in accordance with the establishment of the account that I remain responsible for the payment of the utility charges for my property should the tenant default on the established payment plan.

Property Owner Printed Name(s): \_\_\_\_\_

Signatures: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_

Witness: \_\_\_\_\_ Date: \_\_\_\_\_

**FOR OFFICIAL USE:**

Verified By: \_\_\_\_\_ Date: \_\_\_\_\_