Request for Utility Payment Plan - City of Lynnwood Utilities

Residential customers with a past-due balance may request a payment plan in order to avoid the 10% late fee, water shutoff, and property liens. Payment Plan Terms require that customers pay all new service charges in full, plus 10% of the past-due account balance. To request a payment plan, complete this form and return to the City of Lynnwood (see below).

Service Street Address: _____   Account Number: _____

Customer Information		Property Owner (REQUIRED if different)	
Name		Name	
Street		Street	
City		City	
State / Zip		State / Zip	
Telephone		Telephone	
Email		Email	
Signature		Signature	
Date		Date	

Payment Plan Terms:

1. Pay new charges for each future, two-month billing period, by the specified due date, and:

2. Every two months pay not less than 10% of the past due account balance by the payment due date for new charges. The customer is responsible for calculating and paying the 10% amount due.

3. While customers comply with Payment Plan Terms 1 and 2, the City of Lynnwood will not impose penalty fees, discontinue service (water shutoff), or impose property liens.

4. If the customer fails to comply with Payment Plan Terms 1 and 2, this payment plan will be become null and void. The City of Lynnwood may impose a 10% penalty fee on the account balance, and may initiate water shutoff, property lien(s), or utilize other means to obtain payment.

5. By applying for a utility payment plan, applicant agrees to Payment Plan Terms.

Return this completed application to the City of Lynnwood:

Mailing address: Utility Billing, 19100 44th Ave W, Lynnwood, WA 98036
   DO NOT USE RETURN ENVELOPE PROVIDED WITH STATEMENT (NOT CITY ADDRESS)
Email: ub@Lynnwoodwa.gov
Hand delivery: Utility Drop Box at Lynnwood City Hall (parking lot, across from entrance)

Financial assistance for qualifying low-income households: www.wa211.org or call 2-1-1
Lynnwood offers special rates and rebates for qualifying low-income households: 425-670-5164

For Staff Use:		**For Staff Use:**	
Application received (date)		Current billing charge	$
Application processed (date)		Past-due balance	$
Processed by (staff)		Total account balance	$
Approved (Yes/No)		10% past-due balance	$

11/5/2021