



City of Lynnwood
19100 44th Avenue W
Lynnwood, WA 98036
www.lynnwoodwa.gov

425-670-5000 - Pay by Phone-Select "0"
Utility Billing 425 670-5170 ub@lynnwoodwa.gov

Application for COVID-19 Flexible Payment Plan

Date: _____ Account #: _____ Customer # _____

Service Address: _____

Applicant Name: _____ Owner Tenant

Mailing Address, if not Service Address _____

Phone: _____ E-mail: _____

I, _____ have been financially impacted by the COVID-19 virus and request a flexible payment plan. I request arrangements to pay my outstanding balance over the next (Maximum 6) _____ months in equal installments. First payment due date _____.

Outstanding balance: \$ _____ ÷ _____ (months) = \$ _____ Payment amount.

Terms and Conditions:

Payments are due by the end of each month. No bill or notice will be sent for this payment.

Payments must be made **in addition** to the payment for regularly accrued charges on the account.

The applicant may apply for a maximum of three (3) flexible payment plans.

Applicant Signature: _____ **Date:** _____

Owner (if applicable): _____ **Phone:** _____ **Date:** _____

Submit Completed Application:

Email: ub@lynnwoodwa.gov

Mail: City of Lynnwood 19100 44th Ave W Lynnwood, WA 98036

Deposit: Drive Up Drop Box in City Hall Parking Lot

The City will respond to the applicant within 7 business days of receiving the application.

The City does not charge interest on past due amounts.

City Use Only

Approved By: _____

Rejected Reason: _____

Outstanding Amount Verified

Payment Amount Verified

Flexible Arrangement # _____.