



CITY OF ASTORIA
Utilities Department
1095 Duane
Astoria OR 97103
(503) 338-5172

TENANT REQUEST FOR EXTENSION OF WATER/SEWER BILL DUE DATE

Homeowner or Property Manager,

Your tenant at the address listed below has requested an extension of their water/sewer bill due date. The City will only grant an extension of the due date with your permission.

Service Address: _____ Account #: _____

Tenant Name: _____

Original Statement Due Date: _____ Account Balance Due: _____

Next Statement Billing Date*: _____

Proposed Payment Date: _____ Payment at time of request: _____

Outstanding Account Balance: _____ Date Balance to be Paid: _____

****The full water/sewer bill will be required to be paid before the next bill is generated. An extension would not be granted beyond that date.***

- Approve** this extension **this one time only**.
- Approve** this extension for this time and for future requests.
- Deny** the tenant's request for an extension of their water/sewer bill due date. I would expect the City to proceed with turn off on the next scheduled turn off date if the balance is not paid.

Date

Signature of Homeowner/Property Manager

** Homeowner or property manager, please return this form to the City as soon as possible as the extension cannot be granted without your approval. **The form must be returned to the Finance Department at 1095 Duane Street, third floor; return by email to: jjohnson@astoria.or.us or by fax to (503) 338-6630.** Thank you.

This form must be returned to the City of Astoria by the homeowner or property manager; we cannot accept from any other party.