

TOWN OF OAK GROVE WATER/SEWER DEPT
DUE DATE CHANGE REQUEST FORM:

- 1) No one except the person whose name is on the account can request any action on the account.
- 2) This request is for a continual billing change.
- 3) Information must be provided in writing from your bank or govt. documentation of when your Social Security or Disability is received.
- 4)
The lockout date will be 11 days after your due date listed on your billing statement.
- 5) Request for this extension has to be made in person or by person with power of attorney. ID or ID with power of attorney must be presented at time of request.

Account Name: _____

Service Address: _____

Phone #: _____