

STANDARD FORM

Deferred Payment Agreement
Form No. 98-0267

Account Number: _____
Today's Date: _____
Contract Date: _____

DEFERRED PAYMENT AGREEMENT

NEW BILLS SENT TO YOU THAT ARE NOT PART OF THIS AGREEMENT MUST BE PAID IN FULL ON OR BEFORE THE DUE DATE UNLESS OTHERWISE SPECIFICALLY AGREED TO. LATE CHARGES WILL CONTINUE TO ACCRUE AGAINST THE PAST DUE BALANCE DURING THE COURSE OF THIS AGREEMENT.

FAILURE TO MEET THE TERMS OF THIS AGREEMENT WILL RESULT IN TERMINATION OF SERVICE WITHOUT PRIOR NOTICE IN ACCORDANCE WITH THE TARIFFS ON FILE WITH THE CALIFORNIA PUBLIC UTILITY COMMISSION. TO RESTORE YOUR SERVICE, THE TOTAL BILL MUST BE PAID IN FULL AND A SECURITY DEPOSIT MAY BE REQUIRED PLUS A SERVICE CHARGE. IF YOU ACCEPT THE CONDITIONS OF THIS AGREEMENT, PLEASE DATE AND SIGN BELOW.

PMT #	DATE REQUIRED	AMT REQUIRED
01		