

FILLMORE CITY CO-SIGNATORY AGREEMENT

Co-Signer _____

New Customer _____

Address to be served _____

Service connection date _____

New Customer Information and Signature:

I, _____, said customer of said utilities, do authorize
_____, to be my co-signer on this account and all
subsequent accounts as outlined above.

New Customer

Date

Mailing Address

Phone No.

Fillmore City Corporation Rep.

Date

Co-Signer Information and Signature:

I, _____, utility account number _____,
as a homeowner and customer of Fillmore City utilities with established good payment
history, request to become fully responsible for utilities incurred
by: _____, residing at
_____, utility account number _____,
including all penalties and other expenses related to this account and all subsequent
accounts if said customer fails to pay his/her utility bill within the allotted time as
prescribed in the Fillmore City Electric Policy.

Payments for utility service are due by the 15th of each month and are considered
delinquent after that date. If the account on which you are a co-signer becomes delinquent,

and a shut-off notice is sent to the customer, you will be contacted for payment on the account. A penalty of five percent (5%) per month will be added to all delinquent utility bills.

I, _____, understand that failure to pay, make contact, or notify Fillmore City of termination according to Fillmore City Policy, could cause termination of my personal utility account.

Cancellation of this agreement will be in compliance with City Ordinances which includes, but not limited to the following:

- By mutual agreement evidenced in writing, phone call, or verbally.
- By termination by Fillmore City pursuant to the provisions of this Agreement or the rules and regulations of Fillmore City.
- By the proper assumption of the payment obligations by the customer or another party who has paid all obligatory utility fees as outlined in the Fillmore City Electric Policy, and who has also executed a Utility Service Agreement for the premises indicated above.

I have read and agree with all of the above provisions and have received a copy of this for personal reference.

Co-Signer

Date

Mailing Address

Phone No.