

# FRENCHTOWN CHARTER TOWNSHIP DUPLICATE BILL AGREEMENT

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I wish to receive a duplicate bill for the following:

Address (one address per request) \_\_\_\_\_

Account # \_\_\_\_\_

Please mail the duplicate bill to: \_\_\_\_\_

Enclosed with this request is the current annual payment of **\$10.00** good through December 31<sup>st</sup> of the current year.

Payment by cash or check may be made via the mail, our drop box or in person during our normal business hours of 8:30 a.m. to 4:30 p.m. on Monday – Friday. **Please submit in person if you wish to have a signed copy of this agreement as your receipt.**

**I understand that it is my responsibility to file this form annually. If I do not submit an agreement with my payment by December 31<sup>st</sup> of each calendar year this account will automatically be removed from the following year's duplicate billing list.**

I further understand that I can re-submit my request at any time throughout the year for the full annual fee\* without any pro-ration of the fee for the remaining calendar year.

Request submitted by (PRINT): \_\_\_\_\_

I am making this request as the:     Owner     Tenant     Mortgagee     Other

If Other, please explain: \_\_\_\_\_

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

Ph #: \_\_\_\_\_ Accepted and approved by: \_\_\_\_\_

(For Office Use Only)

**NOTE: If payment is made by check and check is returned for special handling, additional fees will apply and arrangements are considered cancelled.**

**THESE ARRANGEMENTS MUST RECEIVE APPROVAL FROM THE TREASURY and/or WATER DEPARTMENT TO BE CONSIDERED IN EFFECT!**

\* The annual fee may be adjusted from time to time as approved by the Township Board.