**South Huntington Water District**

**Small Business Customers**

**Payment Deferral Agreement Request Form**

Qualified Small Business Customers (see CERTIFICATION below) who have experienced financial hardship during the COVID-19 pandemic are entitled to request deferral of water bill payments without incurring late fees or penalties, as per recent amendments to Public Service Law. Accordingly, the South Huntington Water District Commissioners are offering customers the opportunity to enter into a Deferred Payment Agreement.

Please note that the District will not terminate or disconnect a water service at any time for non-payment of a water bill, taxes or charges.

Account Number:

Property Owner:

Service Location:

Billing Address\*:

\*(if different than above)

Contact Information

Business Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cell Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I attest that due to the COVID-19 state of emergency, which began on or after March 7, 2020, the business that I own or am an officer of has experienced a change in financial circumstances.

In addition, I hereby make the following CERTIFICATION:

(i) the business currently has twenty-five (25) or fewer employees;

(ii) the business is not a publicly held company, or a subsidiary thereof; and,

(iii) the business is not a seasonal, short-term, or temporary customer of the South Huntington Water District.

(Note: Notwithstanding the above, businesses otherwise meeting the above criteria may not be entitled to a deferral if such business is (i) a “high usage customer” as defined by the NYS Public Service Commission or (ii) a customer that the South Huntington Water District can demonstrate has the resources to pay the bill.)

I am hereby requesting that the South Huntington Water District enter into a Deferred Payment Agreement with the small business named below.

Name of Business: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature

Print Name and Title: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please mail, fax or e-mail this form to:

South Huntington Water District, 75 5th Avenue South, Huntington Station, NY 11746
Fax: 631-427-2136

E-mail: info@shwd.org

*For Office Use Only*

Date Received:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_