



HOUSING CHARGE PAYMENT AGREEMENT

Member(s)		Unit:	
Month:	Year:	Amount:	
Reason for late payment:			
SCHEDULE PROPOSED/AGREED TO		PAYMENTS RECEIVED	
DATE	AMOUNT	DATE	AMOUNT
TOTAL		TOTAL	

I/We agree to make payments on or before the date(s) specified.

I/We understand that if I do not make the payment(s) as agreed, the late payment charge will be applied for each late payment and the Board may start the eviction process.

I/We understand that the housing charge for the month of _____, 20__ and all future housing charge payments must be paid prior to 9:00 a.m. the first day of the month.

I/We understand that failure to abide by the terms of this Agreement is grounds for eviction.

Member _____ Signature _____ Date _____

Member _____ Signature _____ Date _____

REQUEST #	APPROVED BY:	SIGNATURE	DATE
First Request	Staff		
Second Request	Staff / Treasurer		
Third Request	Board		