

VILLAGE OF LOUDONVILLE

Exhibit 3

WATER AND SEWER DEPARTMENT

156 North Water Street
P.O. Box 150
Loudonville, OH 44842

Phone (419) 994-3214
Fax (419) 994-3213

Office Hours 8:00 A.M. to 4:00 P.M.
Monday – Friday, Except Holidays

PROMISSORY NOTE

Account Number : _____ Date : _____

Service Address : _____

Customer Name : _____

Customer Address: _____

Customer Phone : _____

The undersigned (customer) hereby agrees to make payment on past due balances to the Village of Loudonville, 156 North Water Street, Loudonville, OH 44842 in the following manner :

The sum of \$ _____ will be paid on or before _____.
Date

OR

Installment payments may be made in the amount of \$ _____ , and in _____ installments thereafter. Payments will commence on _____ and continue until paid in full.

The undersigned (customer) acknowledges by signature below that payments must be received by the Village of Loudonville as per this agreement, or the water service will be disconnected immediately and a \$25.00 disconnection fee assessed.

Customer Signature

Date

Notice to Tenants: Property owners will be notified of the delinquent status of your account.