



Bureau of Utility Operations  
 Utility Operations Complex  
 445 Maxwell Frye Road, MS 4266  
 Millersville, MD 21108

**RESIDENTIAL SEWER INSTALLMENT AGREEMENT**

Property Owner(s): \_\_\_\_\_

Property Address: \_\_\_\_\_

Tax Account Number: \_\_\_\_\_

Owner(s) Mailing Address: \_\_\_\_\_

Phone Number(s) and Email Address(es): \_\_\_\_\_

**FORTY (40) YEAR INSTALLMENT PLAN**

**Check one box only regarding the SEWER Capital Facility Connection Charge:**

\_\_\_\_\_ I/We elect to **FINANCE** the entire Sewer Capital Facility Connection Charge, **\$11,340.00**, which will accrue interest at the current bond rate of **4.8289%** per year, **payable in forty (40) annual installments**, beginning January of the calendar year immediately following the execution of this installment agreement.

**-- OR --**

\_\_\_\_\_ I/We agree to **PAY** \$ \_\_\_\_\_ toward the Sewer Capital Facility Connection Charge.

**-- AND --**

I/We elect to **FINANCE** the remaining amount due for the Sewer Capital Facility Connection Charge, \$ \_\_\_\_\_, which will accrue interest at the current bond rate of **4.8289%** per year, **payable in forty (40) annual installments**, beginning January of the calendar year immediately following the execution of this installment agreement. **Note: If the second box is checked, the amount you pay plus the amount you finance must total \$11,340.**

\_\_\_\_\_  
 Owner Printed Name and Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
 Owner Printed Name and Signature \_\_\_\_\_  
Date

**\*\*FOR DPW FINANCIAL SERVICES USE ONLY\*\***

Tax Account Number: \_\_\_\_\_ Permit Number: \_\_\_\_\_

( ) Property Owner(s) Name(s) and Address(es) agree with the SDAT

Verified By: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Original: OFFICE OF FINANCE - Copy: DPW FINANCIAL SERVICES - Copy: PROPERTY OWNER(S)**