

Woodbine Water Supply Corp.
PO Box 1257
Gainesville, TX 76241
940.668.8337
Rickey Kemp, General Manager



To: Woodbine Water Supply Customers
From: Rickey Kemp, General Manager

Dear WWSC Customers:

Many of our customers who are on Social Security or Disability do not receive their monthly check until after the due date of their water bill. This puts another monetary burden on many who are already stretching every penny. The Board of Directors, at the board meeting on March 11, 2013, chose to implement a new policy concerning late penalties. This policy will be known as "Waiver of Late Fee Charges" and will be implemented immediately.

In order to be able to waive the late fee on your water bill, you **MUST** be on Social Security or Disability. You will need to come in to our office, located at 17 CR 209 in Woodbine. You will need to bring with you your driver's license (or other form of photo I.D.), your Social Security card, and proof of your Social Security Income benefits. If you are disabled, you will need to bring proof of total disability. You will be required to fill out a form, which will need to be notarized. We have two notaries in our office and we will do this for you free of charge.

If you are unable to appear in person, you may call us at 940.668.8337 and request that the form be mailed to you. The form must be filled out in full, notarized, and copies of your driver's license, Social Security card and benefits must be mailed back with the form.

If you have any questions, please call our office at 940.668.8337. We are open Monday-Thursday from 7:30 a.m. until 5:00 p.m., but we close at 4:30 p.m. on Fridays.

Sincerely,

Rickey D Kemp, General Manager
Woodbine Water Supply Corp.

Waiver of Late Fee Application

Account # _____

Name: _____

Address: _____

City/St/Zip: _____

Social Security

Disability

(You **must** include your driver's license or other photo I.D., your Social Security card and proof of Social Security or Disability benefits.)

Proof of Social Security benefits: _____

Proof of Disability benefits: _____

I, _____, am applying for WWSC's waiver of late fee charges. I understand the fee of \$5.00 that applies to all late accounts will be waived due to the fact that my Social Security/Disability check arrives too late to pay the bill before the fees are applied. I have shown proof of this, and will have this fee waived as long as I am on Social Security or Disability. If my circumstances change, I will notify WWSC in a timely manner. I also understand that this is a courtesy to me and will not hold WWSC liable for any problems that may result from this. My bill will be paid by _____ or the late fee will be added.

Signature

Date

State of Texas County of Cooke

Sworn to and subscribed before me this _____ day of _____, 20_____.

Notary Public