

GOFORTH SPECIAL UTILITY DISTRICT

8900 Niederwald Strasse
Niederwald, Texas 78640
Office: (512) 376-5695
Fax: (512) 376-7631

PROMISSORY NOTE (FINANCING)

DATE _____

\$2850. TOTAL OF METER INSTALLATION

\$780.00 DOWN PAYMENT

\$2070.00 TOTAL DUE NOT INCLUDING INTEREST

I, _____, PROMISE TO PAY GOFORTH SPECIAL UTILITY DISTRICT **\$2070.00** DOLLARS FOR BALANCE DUE ON STANDARD SERVICE FEE. TO BE PAID IN (12 MONTHS OR 24 MONTHS). EQUAL PAYMENTS OF **\$183.92 OR \$97.44** EACH TO BEGIN ON _____ WITH FINAL PAYMENT DUE ON _____. I ALSO UNDERSTAND THAT FAILURE TO MAKE PAYMENTS ON THIS UNPAID BALANCE WILL CAUSE A LIQUIDATION OF MY ACCOUNT DUE TO DELINQUENCY. INTEREST AT 1% ON THE UNPAID BALANCE WILL BE CHARGED EACH MONTH.

SIGNATURE OF APPLICANT

THE STATE OF TEXAS

COUNTY OF _____

BEFORE ME, THE UNDERSIGNED AUTHORITY, ON THIS DAY PERSONALLY APPEARED _____, KNOWN TO ME TO BE THE PERSON WHOSE NAME IS SUBSCRIBED TO THE FOREGOING INSTRUMENT, AND ACKNOWLEDGED TO ME THAT _____ EXECUTED THE SAME FOR THE PURPOSE AND CONSIDERATION THEREIN EXPRESSED.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS THE _____ OF _____.

NOTARY PUBLIC

COUNTY _____

COMMISSION EXPIRES _____