



# LAKE IN THE HILLS SANITARY DISTRICT

515 PLUM STREET • LAKE IN THE HILLS IL 60156 • P: 847-658-5122 • F: 847-658-4523

## Lake in the Hills Sanitary District Penalty Waiver Request

Name: \_\_\_\_\_

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

Phone: \_\_\_\_\_

Account#: \_\_\_\_\_

Penalty Amt: \_\_\_\_\_

Date Requested: \_\_\_\_\_

Reason for requesting penalty to be waived:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I request a review of my payment history and the waiver of the penalty on my account per Chapter 4 of the Lake in the Hills Sanitary District Code of Rules and Regulations.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

## BILLING FOR SEWERAGE SERVICE

A. All bills for residential service shall be mailed quarterly to the owner of record as of the first day of the first month succeeding the quarterly period for which the service is billed; or as soon thereafter as possible. Bills for commercial/industrial service may be mailed monthly, as of the first day of the month. The District shall not be responsible for forwarding bills to tenants or other persons. All bills shall be payable not later than the close of business on the 15<sup>th</sup> day after the date the bills are mailed. If payment of the full amount of the bill is not made within said period, a penalty of 10 percent of the amount due shall be added.

B. The 10% penalty required in Section 4.06-A may be waived in the event all of the following conditions are met:

1. A written request for such waiver must be presented to the District; and
2. Such written request must be received by the due date of the customer's next bill; and
3. The customer has displayed a good payment history during preceding 36 months. A good payment history shall be defined as having a) no penalties posted to the account, and b) no penalty waivers requested for the account during the preceding 36 months and c) no returned checks associated with the account.