

CITY OF HIGHLAND

1662 HWY 62/412
HIGHLAND, AR 72542
(870) 856-6199

KYLE CRAWFORD, MAYOR

MARY WILES, RECORDER-TREASURER

SEWER DEPOSIT FORM

Date: _____

Name: _____

Account Number _____

Deposit Address: _____

Mailing Address: _____

Phone Number (____) _____

Deposit Amount: 75.00

Cash

Check

Credit/Debit

This certifies that a deposit is required on the above referenced account. The deposit will be held in a non-interest bearing account at local banking institution. According to ordinance 20-01 adopted by the City of Highland on 03/10/2020, "The deposit amount may be used by the City for the payment of delinquent amounts of the account holder. In the event the City uses any amount of the deposit for the payment of delinquent amounts owed by the account holder, the account holder shall be required to reimburse the City for such payments so that at all times the full deposit amount of \$75.00 shall be held by the City."

Highland Sewer Customer

City of Highland