



Oceano Community Services District

1655 Front Street, P.O. Box 599, Oceano, CA 93475

(805) 481-6730 FAX (805) 481-6836

Request for a Waiver of Late Fee and/or Door Hanger Fee

| | |
|-----------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Name | |
| Address | |
| Date | |
| Signature | <p>_x: _____ I acknowledge that according to District Ordinance 2015-1, I can request a waiver of late fees and/or door hanger fees once every 24 months provided that I have not been late in paying for the past 24 months, or since the account was opened, whichever is less.</p> |

For office use only:

| | |
|-----------------|--|
| Account Number | |
| Approved/Denied | |