



Name: _____

Accounts Requested for Hardship: _____

Explanation of Need and/or Hardship:

Contact Number: _____

Contact Email: _____

Please note the City desires to assist citizens in this tough time, however, requesting the Hardship Extension does not guarantee that it will be accepted. Any request submitted will be responded to by Utility Billing Staff regardless if it is accepted or denied. Please email the form to Kathy.Cotton@groveland-fl.gov, submit at City Hall through the drop box, or if open to a Utility Staff member.

Signature

Printed Name

Date