

CITY OF ASBURY PARK
ONE MUNICIPAL PLAZA
ASBURY PARK, NEW JERSEY 07712

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LISA ESPOSITO, RMC, CITY CLERK

Installment Plan Application (Please complete the entire form and supply a copy of a photo ID)

Date: _____
Block: _____ Lot: _____ Qual: _____
Property Location: _____ Property Class: _____

I, _____, am the owner of the above listed property and hereby request to enter into a sewer utility payment plan with the City of Asbury Park governed under the provisions of N.J.S.A. 54:5-19 and P.L. 2021, c. 317.

P.L. 2021, c. 317 requires residential customers to be offered an installment plan for any sewer arrearages accruing between March 9, 2020 and March 15, 2022. Sewer liens that were sold before January 1, 2022 cannot be included in the installment plan. Installment plans offered by municipalities and local authorities for arrearages accruing between March 9, 2020 and March 15, 2022 are subject to the provisions of N.J.S.A. 54:5-19, unless P.L. 2021, c. 317 states otherwise. A residential customer must agree to an installment plan within 30 days of being offered a plan.

The installment plan shall have a minimum 12-month duration, unless the residential customer requests a shorter payback period. Installment plans must have equal monthly payments and a residential customer must make timely payments on the arrearages and current fees and charges (including property taxes and local assessments). The residential customer must know the monthly payment amount for the installment plan before agreeing to the plan. If the residential ratepayer does not pay their arrearages and/or current charges within 30 days after the due date, then the installment plan is void. All installment plan and current payments must be made with certified funds.

Monthly Payment: _____ (Completed by the Collector)
Signature: _____
Print Name: _____

Contact Info:
Phone: _____ Fax: _____
Email: _____

OFFICIAL USE ONLY:
Approved: _____ Start Date: _____ Duration: _____
Disapproved: _____ Reason: _____
Signature of the Collector: _____ Date: _____