



Payment Arrangement Request Form

Date of Request

Account Type

- Residential
 Non-Residential

Business Name: _____

Contact Information

Name _____

Phone Cell _____ Home _____ Work _____

Email _____

Mailing Address _____

Service Address _____
(if different from mailing)

BWS Account # _____ Best Day(s) and Time(s) to Contact _____

Reason Unable to Pay COVID-19 Not COVID-19 related

I am unable to pay my full water and/or sewer bill due to:

- | | | |
|---|-----------------------------------|-----------------------------|
| <input type="checkbox"/> Business Closed | <input type="checkbox"/> Job Loss | Event Effective Date |
| <input type="checkbox"/> Furlough | <input type="checkbox"/> Layoff | <input type="text"/> |
| <input type="checkbox"/> Other (please explain) _____ | | |

Payment Plan Requested: A Payment Arrangement is a plan to pay the current bill charge plus the Previous Balance in Monthly Installments.

- I am requesting that Board of Water Supply (BWS) accept a Total Monthly Payment of \$_____ beginning _____ for _____ months.
- I currently have a Payment Arrangement and request to establish a new arrangement.

Important Information

- You will be notified from BWS regarding this matter. Please respond promptly.
- Please ensure BWS has your current contact information at all times. Changes can be emailed to customerservice@hbws.org.
- You will continue to be billed for all water and sewage usage. We encourage you to make regular payments of any amount you can afford at this time to keep your bill as low as possible.

Submit completed form to:
Honolulu Board of Water Supply | Customer Care Division
630 South Beretania Street | Honolulu, Hawaii 96843-0001
Email: customerservice@hbws.org | Online Form: [Submit Now](#)