

Patron Account Payment Plan

If you are unable to pay the entire balance on a library account, you may be eligible for a payment plan. Eligibility includes at least one of the following (check all that apply):

- All library material has been returned but the account has outstanding charges.
- The account has been referred to a collection agency.

The first payment is due **TODAY**. Following payments are due the same day every month until the balance is paid. For example, if today's date is January 3, the next payment is due on or before February 3. Statements will not be mailed. Payments may be made in the following ways:

1. In person by visiting a Las Vegas-Clark County Library District branch.
2. Check or Money Order made payable to LVCCLD, and sent to the address above.
3. Online at LVCCLD.org (log in and select "Fees" under "My Borrowing").

	Account Balance	Minimum Payment
<input type="checkbox"/>	\$50 or less	\$10 per month
<input type="checkbox"/>	\$51–\$100	\$15 per month
<input type="checkbox"/>	\$101–\$200	\$25 per month
<input type="checkbox"/>	\$201–\$300	\$50 per month
<input type="checkbox"/>	\$301–\$499	\$75 per month
<input type="checkbox"/>	Over \$500	\$100 per month

PLEASE COMPLETE AND SIGN BELOW

Cardholder Name:		Total Balance Owed:	
Library Card Number:		Amount Paid Today:	
Phone Number:		Next Payment Due Date:	
Email Address:		Last 4 Digits of Credit Card # (online payment)	

I agree to a minimum payment of \$_____ which is due by the _____ day of each month until the account balance is paid in full. I understand that library card privileges will NOT be restored until the account balance is paid in full. I also understand that failure to make a scheduled payment may result in my account being referred to an outside collection agency without further notice.

Cardholder Signature: _____ **Date:** _____

Submit completed form: to any library branch; by email to patronaccounts@lvccld.org; by fax to 702.507.6171; or by mail to the address above.

FINANCIAL SERVICES USE ONLY	
Date of Collection Agency Suspension:	
Date(s) Account Checked for Payment (continue on back):	
Date Plan Defaulted (Collection Agency Status Resumed) Attach a copy of Acct. Records:	
Date Payment Plan Completed:	

STAFF USE ONLY	
Branch:	
Staff:	
Phone:	