



# Village of Westchester

## HARDSHIP HEARING REQUEST

UTILITY BILLING: 708-345-0020 OPT. 4

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone #: \_\_\_\_\_

Assigned hearing date is on  
Wednesday, \_\_\_\_\_,  
2025 at 5:00 PM in the court room  
at the Village Hall.

Current balance: \$ \_\_\_\_\_

I, \_\_\_\_\_, am requesting a hardship hearing regarding my

Village of Westchester utility bill because \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_.

- I understand there is one hardship arrangement allowed every six months and I have not had a hardship arrangement in the last six months.
- I acknowledge that I have received the date and time of the hearing above.
- I understand that if I pay my balance prior to the date of the hearing, I will not be required to be present at the hearing.
- I understand that if I cannot be present at the hearing, I will notify Utility Billing PRIOR to 4:00 PM on the date of the hearing, or the missed appointment will count toward my use of a hardship once every six months.

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Signed: \_\_\_\_\_

Dated: \_\_\_\_\_

\* One copy to the applicant

\* One copy to Utility Billing