



## Extended Payment Plan Request for 2026

Date: \_\_\_\_\_

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

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

City/State/Zip: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Daytime Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

SPRAI Address if different from above: \_\_\_\_\_

### **Request (check one):**

**Length of Payment Plan:**    ☐ 4-Months    ☐ 5-Months    ☐ 6-Months    ☐ 7-Months

### **Rules:**

1. No extended payment plans for the 2026 Assessment will be granted after **April 30, 2026**.
2. This form must be completed in its entirety and e-mailed to **finance@clubsienna.com**.
3. Once the form is received, we will create a payment plan agreement and e-mail it to you for signature.
4. Payment plans are not effective until we receive a signed agreement. We will send confirmation upon receipt.
5. If you have an outstanding balance from previous years, or if you have defaulted on a payment plan in the past two years, you may not qualify for an extended payment plan. If you do not qualify for an extended plan, we will contact you by e-mail.

**Payments will have the following fees built in:**

**Interest on principal balance at 0.83% per month**

**Payment plan fee of \$25 per month**