

APPLICATION FOR WATER/SEWER SERVICE

Hardin County Water District No.1

1400 Rogersville Road
Radcliff, KY. 40160

Phone: 351-3222 - FAX: 351-3420 - web: www.hcwd.com

Automated Payment System 1-270-872-0967



TYPE OF APPLICATION:

- NEW TAP / NEW BUILDING (REQUIRES PLUMBING PERMIT)
- NEW TAP / EXISTING BUILDING (REPLACING WELL OR CISTERN - REQUIRES PLUMBING PERMIT)
- NEW CUSTOMER / NEW ACCOUNT / EXISTING BUILDING & EXISTING TAP

1. INFORMATION ABOUT APPLICANT:

FULL NAME (First, Middle initial, Last) _____

OTHER AUTHORIZED PERSON TO RELEASE ACCOUNT INFORMATION TO _____

SSN: OTHER AUTHORIZED PERSON _____

ADDRESS WHERE SERVICE IS LOCATED: _____

City, State, ZIP Code: _____

Phone Number: _____ Alternate Phone Number: _____

Birth-date: _____ Social Security Number: _____

MAILING ADDRESS (If different from service address): _____

City, State, ZIP Code: _____

Date requested for to be done: Same day service if before 2:00PM (does not apply for new tap) _____

(District Use Only)

_____ CustomerAcct #

_____ Work Order #

_____ Parcel #

_____ Meter #

CHECK TYPE OF ACCOUNT:

- Single Family Residential / Owner = Resident
- Multi-Family (Duplex, Apartment)
- Commercial / Industrial
- Single Family Residential / Rental Property
- Mobile Home (Master Meter for New Parks only)
- Agricultural (Non-Person Occupied Building)

I authorize and instruct the Water District to run a credit check to determine my credit worthiness for a waiver of the deposit. I will provide proof of identity by submitting a photo identification.

Payment method: (District Use Only)

CK MO CASH Credit Card

_____ Deposit

_____ Service Charge

_____ Credit Check Score

_____ Bill SC

2. SKIP IF NOT NEW TAP > DESCRIBE CLOSEST INTERSECTION AND WHICH BUILDING THE TAP WILL BE INSTALLED AT:

INFORMATION NEEDED FOR NEW TAP / NEW BUILDING (SKIP IF NOT NEW TAP):

METER SIZE REQUESTED (CHECK BOX): 5/8 Inch 1.5 Inch
 1 Inch _____ List Other Size (Requires Custom Estimate)

\$ _____ Total Amount Due sewer tap inspection \$ _____ Total Amount Due
(Filled in by District)

3. SIGNATURE AND AGREEMENT: PLEASE READ CAREFULLY

By signing below, I am agreeing that I have provided the correct information about myself and the service address, that important information about billing dates, due dates, turn off dates and rates and charges have been explained to me as well as charges required to pay for a new water and/or sewer tap inspection (if applicable) and open a new account for service.

I have also been offered to see and read the District's current tariff which includes all the current rates, charges and billing policies and rules. I have also been told whether or not this address will require City of Radcliff Storm Water services, and that I will be responsible to pay those charges to the City of Radcliff for these services as well.

I also agree that if I am constructing a new building, that it is my responsibility to install all plumbing fixtures that are required by plumbing codes, which may include a hot water heater expansion tank. I also understand that it is my responsibility to install and maintain any pressure regulators to keep water pressure inside after the meter at an acceptable level. I agree that the District is not responsible for any property damages caused by faulty plumbing or erratic pressures on the District's water mains.

I also give permission to District employees and sub-contractors to come on to my property as needed to install or repair a new meter and service, and to restore grass or landscaping disturbed during installation or repairs.

I agree that I will be responsible for all service used and payment of any charges and that I will notify the District if I should move away, and will be responsible for all charges at this address, until I notify the District that I have moved;

CUSTOMER SIGNATURE: _____ Date: _____