

2004-00148

NONRECURRING CHARGE COST JUSTIFICATION

Type of Charge: FIELD COLLECTION CHARGE

RECEIVED

APR 05 2004

**PUBLIC SERVICE
COMMISSION**

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

2 X 12	24
_____	_____

Total Field Expense	\$ 24

2. Clerical and Office Expense

A. Supplies

\$ _____

B. Labor

2

Total Clerical and Office Expense	\$ 2

3. Miscellaneous Expense

A. Transportation

\$ 4

B. Other (Itemize)

_____	_____
_____	_____
_____	_____

Total Miscellaneous Expense	\$ 4

Total Nonrecurring Charge Expense	\$ 30

NONRECURRING CHARGE COST JUSTIFICATION

Type of Charge: METER TESTING CHARGE

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

2 x 12	24
_____	_____

Total Field Expense \$ 24

2. Clerical and Office Expense

A. Supplies

\$ 1

B. Labor

Total Clerical and Office Expense \$ 1

3. Miscellaneous Expense

A. Transportation

\$ 5

B. Other (Itemize)

_____	_____
_____	_____
_____	_____

Total Miscellaneous Expense \$ 5

Total Nonrecurring Charge Expense \$ 30

NONRECURRING CHARGE COST JUSTIFICATION

Type of Charge: RECONNECTION FEE

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

2 x 12	24
_____	_____

Total Field Expense \$ 24

2. Clerical and Office Expense

A. Supplies

\$ 2

B. Labor

10

Total Clerical and Office Expense \$ 12

3. Miscellaneous Expense

A. Transportation

\$ 4

B. Other (Itemize)

_____	_____
_____	_____
_____	_____

Total Miscellaneous Expense \$ 4

Total Nonrecurring Charge Expense

\$ 40

NONRECURRING CHARGE COST JUSTIFICATION

Type of Charge: SERVICE RECONNECTION AFTER HOURS

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

<u>1 X 12 & 1½ X 18</u>	<u>39</u>
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Total Field Expense	\$ <u>39</u>
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2. Clerical and Office Expense

A. Supplies

\$ 2

B. Labor

10

Total Clerical and Office Expense	\$ <u>12</u>
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3. Miscellaneous Expense

A. Transportation

\$ 4

B. Other (Itemize)

_____	_____
_____	_____
_____	_____

Total Miscellaneous Expense	\$ <u>4</u>
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Total Nonrecurring Charge Expense	\$ <u>55</u>
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NONRECURRING CHARGE COST JUSTIFICATION

Type of Charge: RETURNED CHECK

1. Field Expense:

A. Materials (Itemize)

_____	\$ _____
_____	_____
_____	_____

B. Labor (Time and Wage)

_____	_____
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Total Field Expense	\$ _____
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2. Clerical and Office Expense

A. Supplies

_____	\$ <u>3</u>
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B. Labor

_____	<u>22</u>
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Total Clerical and Office Expense	\$ <u>25</u>
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3. Miscellaneous Expense

A. Transportation

_____	\$ _____
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B. Other (Itemize)

_____	_____
_____	_____
_____	_____

Total Miscellaneous Expense	\$ _____
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Total Nonrecurring Charge Expense	\$ <u>25</u>
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