RECEIVED

TO:

KENTUCKY PUBLIC SERVICE COMMISSION

IS

JUN 17 2019

PUBLIC SERVICE COMMISSION

FROM:

**DONNA BRAUTIGAN** 

**NIXUTIL SANITATION ASSOCIATION** 

**2048 LINCOLN DRIVE** 

**INDEPENDENCE, KY 41051** 

THIS TO CERTIFY THAT THE INFORMATION IN THIS BOX IS COMPLETE TO THE BEST OF MY KNOWLEDGE.

I Donna Dracetigan / Secretary Treasurer
of pipetel Sanctation do severar the
contente of their box was Grepared
to the best of my knowledge.

3

Deana S. Danon, Notary Public 6-13-19

DEANNA S. DAMON
Notary Public - State at Large
Kentucky
My Commission Expires Sept. 14, 2019
Notary ID 542046

# TO: KY PUBLIC SERVICE COMMISSION FRANKFORT, KY

RECEIVED

JUN 1 7 2019

PUBLIC SERVICE COMMISSION

FROM: NIXUTIL SANITATION ASSOCIATION

**DONNA BRAUTIGAN** 

**2048 LINCOLN DRIVE** 

**INDEPENDENCE, KY 41051** 

The information you requested per Case No. 2019-00024 is contained in this box and to the best of my knowledge is the information that you requested. I have attached labels indicating what each of the packets represent. Each response is true and accurate and has been prepared by me with the exception of the bank statements which were provided by BB and T bank. In addition, the discharge permit was sent to me by Antionette Marshall who is the person in charge of the Pace Analytical Report that we file quarterly.

I was requested to make six copies and in reality we do not have a surplus of money to have additional copies made. I talked with Attorney Bellamy and he advised me to send in one copy which we had to pay Fed X and that was not part of our budget for the year 2019.

Additionally, I am not sure if the commission realizes that we have 34 customers who should pay a quarterly fee which you commissioned us to charge beginning April 1. You indicated we were not to charge a late fee. Now it is June 12, 2019 and at present we have approximately 10 homeowners who should have paid their quarterly amount in April and have made no effort to pay. It is not sensible to not charge late fees when public electric, water, SD#1 charges late fees and that a small subdivision of 34 customers cannot require individuals to pay a late fee. We also have one customer who moved in July 2018 and has not paid any fee up to date because they say the sewage fee is illegal.

I am taking this packet of materials to the Notary to have notarized that to the best of my ability all information in this packet is correct.

# MINUTES OF THE NIXUTIL SANITATION ASSOCIATION, INC. MEETING HELD MAY 13, 2019 AT 7:00 P.M. AT THE DURR LIBRARY, INDEPENDENCE, KENTUCKY

President Harold Brautigan called the meeting to order at 7:00 p.m.

Gailen Bridges was appointed as Temporary Secretary for the taking of the Minutes.

The following residents and property owners were present:

Vern D. Kidd, Buddy and Freddy Isaacs, Mark Noble, Rose Stewart, Ken Webster, Jess and Helen Lawson, Gary and Kristy Grubbs, Nancy and Bill Morgan, Mark Price, James R. Holt, Roy and Bev Hancock, Kenny Patel, Gailen Bridges, Lori Fuehner, and Harold and Donna Brautigan

- 1. President Brautigan reported that a 40-page form required by Kentucky PSC was filled out by Tax Bytes and was accepted by PSC. A motion was made by Bill Morgan, seconded by Jess Lawson to pay Tax Bytes \$200.000 for that form preparation, and to pay it in the future if necessary. The motion passed unanimously.
- 2. President Brautigan reported that PSC in Frankfort had set a \$61.73 per month tariff, which would be \$185.19 per quarter. Copies of the tariff were passed out to those present. The PSC also stated that all customers must be charged the same amount and the PSC is considering Nixutil's request for late fees.
- 3. It was reported that one (1) family is delinquent on payment of their sanitation bills. Motion was made by Rudolph Holt, seconded by Beverly Hancock, who authorized the officers of the Association to hire an attorney and file a small claims complaint against any delinquent customers. The motion passed unanimously.
- 4. President Brautigan reported that there is a need for more gravel to repair the driveway to the sewer plant at 11961 Catalina Drive, Independence, Kentucky. Gailen Bridges made a motion, seconded by Bill Morgan to authorize President Brautigan to solicit bids and have the repairs done by the lowest and best bid.
- 5. Treasurer Donna Brautigan gave an overview of the plant expenses and finances.
- 6. Bill Morgan made a motion to adjourn, seconded by Mark Price. The motion passed unanimously and the meeting concluded at 7:52 p.m.

I certify that these are accurate Minutes of the above meeting.

Gailen Bridges, Temporary Secretary

## 

C/O Donna Brautigan, Treasurer \* 2048 Lincoln Drive, Independence, KY 41051

TO THE RESIDENTS OF BEL-AIRE, LINCOLN, AND CATALINA DRIVES

THERE WILL BE A SPECIAL MEETING CALLED FOR MONDAY, MAY 6, 2019 AT THE R.C. DURR LIBRARY AT NICHOLSON IN THE SAME ROOM THAT OTHER MEETINGS HAVE BEEN HELD. 7:00-8:30. THIS IS A VERY IMPORTANT MEETING AS THE KENTUCKY PUBLIC SERVICE COMMISSION HAS RAISED OUR MONTHLY TARIFF AND EVERYONE NEEDS TO BE MADE AWARE OF THE INCREASE.

SOME HOMEOWNERS HAVE NOT PAID JANUARY-MARCH AND THAT FEE IS \$140.00 FOR THOSE THREE MONTHS. SOME HOMEOWNERS HAVE PAID THE AMOUNT OF \$140.00 FOR APRIL-JUNE. SOME HOMEOWNERS HAVE PAID THE \$155.00 WE VOTED ON AND THAT IS INCORRECT. STARTING APRIL 1 EVERY HOMEOWNER WILL PAY \$185.19 PER QUARTER. THIS IS \$45.19 MORE PER QUARTER. EACH QUARTER YOUR PAYMENT WILL BE DUE ON THE 20<sup>TH</sup> OF THE MONTH PRIOR TO THE NEXT QUARTER. IMMEDIATELY YOU WILL BE REQUIRED TO PAY THE ADDITIONAL FOR APRIL-JUNE. BY JUNE 20 YOU WILL BE REQUIRED TO PAY \$185.19 FOR JULY-SEPTEMBER. BY SEPTEMBER 20 YOU WILL BE REQUIRED TO PAY \$185.19 FOR OCTOBER-DECEMBER. THIS HAS ALL COME DOWN FROM THE PUBLIC SERVICE COMMISSION IN FRANKFORT ARE CONTINUALLY CHECKING OUR PLANT TO KEEP IT UP TO DATE. (WHICH IS COSTLY) ACCORDING TO THE COMMISSION WHEN THIS ENACTMENT IS FINALIZED THE COST MAY CHANGE A FEW PENNIES HERE AND THERE, HOWEVER, WE WERE GIVEN WRITTEN PERMISSION TO COLLECT PAYMENT STARTING APRIL 1.

PLEASE ATTEMPT TO ATTEND THE MEETING FOR FURTHER DETAILS ABOUT ONGOING MATTERS WITHIN OUR ASSOCIATION. THERE ARE MANY ISSUES TO BE DISCUSSED,

**SINCERELY** 

**DONNA BRAUTIGAN** 

Accidente Donna Bracetegae

Page 1 of 4 01/31/17 1180000246117

> 785-24-01-00 80125 5 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

Bank Statements per BBT Bank

## Your account statement

For 01/31/2017

## Contact us



BBT.com

(800) BANK-BBT or (800) 226-5228

You've built a solid business network.

Now BB&T introduces a way to make it work for you:

Refer up to 4 small businesses and receive \$400! \* Refer fellow small businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

To participate in this incentive program, stop by your closest local financial center to pick up a registration form. Visit us online at BBT.com/Business for more information or call us at 800-BANK-BBT.

\* Referring Client Incentive: Up to a maximum of four (4) \$100 incentives (for a total of \$400) is available to a referring client for each referred business that meets qualifiers. Existing clients must have a BB&T business checking account in good standing with a balance greater than or equal to \$250 within 90 days after the referred account qualifies for the incentive. Accounts are only reviewed once.

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#### ■ BUSINESS VALUE 200

#### **Account summary**

Your previous balance as of 12/30/2016	\$4,491.87
Checks	- 2,340.79
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 2,380.00
Your new halance as of 01/31/2017	= \$4 531 08

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DA
01/06	130	282.23	01/11	132	876.06	01
01/10	131	1,000.00	01/18	133	47.00	

DATE	CHECK #	AMOUNT(\$)
01/24	134	135.50
10		
Total che	ecks	= \$2,340.79

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
01/03	DEPOSIT	420.00
01/27	COUNTER DEPOSIT	840.00
01/30	COUNTER DEPOSIT	1,120.00

Total deposits, credits and interest

= \$2,380.00



Vault	Coin Supplied Box Deposited Items (On Us) Deposited Items (In-State) Deposited Items (Out Of State)	\$4.00 \$0.15 \$0.15 \$0.15	
Wire A	e Deposit Monthly Maintenance dvice Phone ate Analysis Statement	\$47.00 \$15.00 \$10.00	



785-24-01-00 80125 6 C 001 29 S 66 002
NIXUTIL SANITATION ASSOCIATION
2047 LINCOLN DR
INDEPENDENCE KY 41051-9761

## Your account statement

For 02/28/2017

#### Contact us



BBT.com



(800) BANK-BBT or (800) 226-5228

## You've built a solid business network. Now BB&T introduces a way to make it work for you:

Refer up to 4 businesses and receive \$400! \* Refer fellow businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

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#### **■ BUSINESS VALUE**

#### **Account summary**

Your previous balance as of 01/31/2017	\$4,531.08
Checks	- 1,509.56
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,260.00
Your new balance as of 02/28/2017	= \$4,281.52

#### Checks

DATE	CHECK #	AMOUNT(\$)
02/02	135	77.22
02/07	136	79.22

DATE	CHECK #	AMOUNT(\$)
02/07	137	276.73
02/21	138	1.000.00

DATE	CHECK #	AMOUNT(\$)
02/21	139	36.04
02/28	140	40.35

Total checks

= \$1,509.56



For general questions/comments or to report errors about your statement or account, please call BB&T Phone24 at 1-800-BANK BBT (1-800-226-5228) 24 hours a day, 7 days a week. BB&T Phone24 Client Service Associates are available to assist you from 6 a.m. until midnight ET. You may also contact your local BB&T financial center. To locate a BB&T financial center in your area, please visit BBT.com.

#### Electronic fund transfers

In case of errors or questions about your electronic fund transfers, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, contact us as soon as possible. You may write to us at the following address:

BB&T Liability Risk Management

P.O. Box 996

Wilson, NC 27894-0996

You may also call 88&T Phone24 at 1-800-BANK BBT or visit your local BB&T financial center. We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the error or problem appeared. Please provide the following information:

- Your name and account number
- Describe the error or transfer you are unsure about, and explain in detail why
  you believe this is an error or why you need more information
- The dollar amount of the suspected error

We will investigate your complaint/concern and promptly take corrective action. If we take more than ten (10) business days to complete our investigation, your account will be credited for the amount you think is in error, minus a maximum of \$50 if we have a reasonable basis to believe that an unauthorized electronic fund transfer has occurred. This will provide you with access to your funds during the time it takes us to complete our investigation. You may have no liability for unauthorized Check Card purchases, subject to the terms and conditions in the current BB&T Electronic Fund Transfer Agreement and Disclosures. If you have arranged for direct deposit(s) to your account, please call BB&T Phone24 at 1-800-BANK BBT to verify that a deposit has been made.

If your periodic statement shows transfers that you did not make, tell us at once. If you do not inform us within sixty (60) days after the statement was mailed to you, you may not get back any money you lost after sixty (60) days. This will occur if we can prove that we could have stopped someone from taking the money if you had informed us in time. If a good reason kept you from informing us, we will extend the time periods.

#### Important information about your Constant Credit Account

Once advances are made from your Constant Credit Account, an INTEREST CHARGE

will automatically be imposed on the account's outstanding "Average daily balance." The INTEREST CHARGE is calculated by applying the "Daily periodic rate" to the "Average daily balance" of your account (including current transactions) and multiplying this figure by the number of days in the billing cycle. To get the "Average daily balance," we take the beginning account balance each day, add any new advances or debits, and subtract any payments or credits and the last unpaid INTEREST CHARGE. This gives us the daily balance. Then we add all of the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "Average daily balance."

Member FDIC

#### Billing rights summary

#### In case of errors or questions about your Constant Credit statement

If you think your statement is incorrect, or if you need more information about a Constant Credit transaction on your statement, please call 1-800-BANK BBT or visit your local BB&T financial center. To dispute a payment, please write to us on a separate sheet of paper at the following address:

BankCard Services Division

P.O. Box 200

Wilson, NC 27894-0200

We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the error or problem appeared. You may telephone us, but doing so will not preserve your rights. In your letter, please provide the following information:

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  you believe this is an error or why you need more information
- The dollar amount of the suspected error

During our investigation process, you are not responsible for paying any amount in question; you are, however, obligated to pay the items on your statement that are not in question. While we investigate your question, we cannot report you as delinquent or take any action to collect the amount in question.

#### Mail-in deposits

If you wish to mail a deposit, please send a deposit ticket and check to your local BB&T financial center. Visit BBT.com to locate the BB&T financial center closest to you. Please do not send cash.

#### Change of address

How to Reconcile Your Account		Outstan	ding Checks an	d Other Debits (Sec	tion A)
	73. 24	Date/Check #	Amount	Date/Check #	Amount
List the new balance of your account from your latest statement here:	7.5				
<ol><li>Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record</li></ol>					
the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:	12.3				
Subtract the amount in line 2 above from the amount in line 1					
above and enter the total here:				<del> </del>	
4. Record any outstanding credits in section B. Record the transaction					
date, credit type and the credit amount. Add up all of the credits and enter the sum here:		Outstand	ing Deposits a	nd Other Credits (Se	ection B)
5. Add the amount in line 4 to the amount in line 3 to find your		Date/Type	Amount	Date/Type	Amount
balance. Enter the sum here. This amount should match the balance in your register.					
For more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-5:					



785-24-01-00 80125 2 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

## Your account statement

For 03/31/2017

## Contact us



BBT.com

8) <del>(</del>8

(800) BANK-BBT or (800) 226-5228

You've built a solid business network.

Now BB&T introduces a way to make it work for you:

Refer up to 4 businesses and receive \$400! \* Refer fellow businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

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## ■ BUSINESS VALUE

#### **Account summary**

Your previous balance as of 02/28/2017	\$4,281.52
Checks	- 1,891.03
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 2,130.00
Your new balance as of 03/31/2017	= \$4,520,49

#### Checks

DATE	CHECK #	AMOUNT(\$)
03/14	141	235.36
03/13	142	1,655.67
Total checks		= \$ 1,891.03

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
03/08	COUNTER DEPOSIT	420.00
03/20	COUNTER DEPOSIT	700.00
03/27	COUNTER DEPOSIT	420.00
		continued



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**BB&T Liability Risk Management** 

P.O. Box 996

Wilson, NC 27894-0996

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Member FDIC

#### Billing rights summary

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**BankCard Services Division** 

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Wilson, NC 27894-0200

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#### Change of address

How to Reconcile Your Account	Outstanding Checks and Other Debits (Section A)				
		Date/Check #	Amount	Date/Check #	Amount
. List the new balance of your account from your latest statement here:					
Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record					
the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:					
Subtract the amount in line 2 above from the amount in line 1					
above and enter the total here:			·····	1	
. Record any outstanding credits in section B. Record the transaction	Torr 17				
date, credit type and the credit amount. Add up all of the credits and enter the sum here:	- TANK	Outstandi	ng Deposits a	nd Other Credits (Se	ection B)
. Add the amount in line 4 to the amount in line 3 to find your		Date/Type	Amount	Date/Type	Amount
balance. Enter the sum here. This amount should match the balance in your register.	- T				
or more information, please contact your local BB&T relationship mana BT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-52)					+

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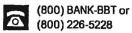
## Your account statement

For 04/28/2017

#### Contact us



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Now BB&T introduces a way to make it work for you:

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BRAT Member FDIC

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#### **BUSINESS VALUE**

#### Account summary

3.50	
Your previous balance as of 03/31/2017	\$4,520.49
Checks	- 1,233.24
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,130.00
Your new balance as of 04/28/2017	= \$4.417.25

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
04/05	143	208.24	04/11	* 145	1,000.00	04/26	146	25.00
* indicate	es a skip in seque	ntial check numbers a	bove this it	em		Total che	ecks	= \$1,233,24

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
04/03	COUNTER DEPOSIT	990.00
04/10	COUNTER DEPOSIT	140.00
Total de	eposits, credits and interest	=\$1,130.00

Total deposits, credits and interest



785-24-01-00 80125 5 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

## Your account statement

For 05/31/2017

### Contact us



AMOUNT(\$)

1,000.00

BBT.com

<u>a</u>

CHECK #

\*151

DATE

05/23

(800) BANK-BBT or (800) 226-5228

Business owners and leaders of public and nonprofit organizations are encouraged to consider providing BB&T@Work as a no-cost employee benefit to their associates. Academic research demonstrates the link between financial wellness and job performance, and the BB&T@Work program contains resources to help your staff reduce stress associated with their personal financial circumstances. Our Financial Foundations educational modules, U by BB&T, and the benefit-rich Elite@Work checking account can set financial wellness in motion in your workplace--resulting in more productive, happier employees, and a stronger bottom line. For more information, contact your banking officer or visit BBT.com/AtWork.

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#### ■ BUSINESS VALUE 200

CHECK #

144

#### **Account summary**

Your previous balance as of 04/28/2017	\$4,417.25
Checks	- 1,476.01
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,960.00
Your new balance as of 05/31/2017	= \$4,901,24

AMOUNT(\$)

135.50

#### Checks DATE

05/01

05/05	* 147	269.91	05/10	149	33.73		
* indicat	tes a skip in sequer	ntial check numbers a	bove this iter	m ,		Total checks	= \$1,476.01
Deposit	ts, credits and int	erest					
DATE	DESCRIPTION						AMOUNT(\$)
05/09	COUNTER DEPO	OSIT					700.00
05/16	COUNTER DEPO	OSIT					700.00
05/22	COUNTER DEPO	OSIT					280.00
05/25	COUNTER DEPO	OSIT			* * · · · · · · · · · · · · · · · · · ·		280.00
Total de	eposits, credits and	d interest					= \$1,960.00

CHECK #

148

DATE

05/12

#### **Shred Financial Documents**

Protect your personal information by disposing of this statement and other sensitive financial documents using a cross-cut shredder. If you don't have one, consider using a commercial shredding service.

Learn more Document Shredding and Retention Guidelines at BBT.com/Security

AMOUNT(\$)

36.87



For general questions/comments or to report errors about your statement or account, please call BB&T Phone24 at 1-800-BANK BBT (1-800-226-5228) 24 hours a day, 7 days a week. BB&T Phone24 Client Service Associates are available to assist you from 6 a.m. until midnight ET. You may also contact your local BB&T financial center. To locate a BB&T financial center in your area, please visit BBT.com.

#### Electronic fund transfers

In case of errors or questions about your electronic fund transfers, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, contact us as soon as possible. You may write to us at the following address:

BB&T Liability Risk Management

P.O. Box 996

Wilson, NC 27894-0996

You may also call BB&T Phone24 at 1-800-BANK BBT or visit your local BB&T financial center. We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the error or problem appeared. Please provide the following information:

- Your name and account number
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We will investigate your complaint/concern and promptly take corrective action. If we take more than ten (10) business days to complete our investigation, your account will be credited for the amount you think is in error, minus a maximum of \$50 if we have a reasonable basis to believe that an unauthorized electronic fund transfer has occurred. This will provide you with access to your funds during the time it takes us to complete our investigation. You may have no liability for unauthorized Check Card purchases, subject to the terms and conditions in the current BB&T Electronic Fund Transfer Agreement and Disclosures. If you have arranged for direct deposit(s) to your account, please call BB&T Phone24 at 1-800-BANK BBT to verify that a deposit has been made.

If your periodic statement shows transfers that you did not make, tell us at once. If you do not inform us within sixty (60) days after the statement was mailed to you, you may not get back any money you lost after sixty (60) days. This will occur if we can prove that we could have stopped someone from taking the money if you had informed us in time. If a good reason kept you from informing us, we will extend the time periods.

#### Important information about your Constant Credit Account

Once advances are made from your Constant Credit Account, an INTEREST CHARGE

will automatically be imposed on the account's outstanding "Average daily balance." The INTEREST CHARGE is calculated by applying the "Daily periodic rate" to the "Average daily balance" of your account (including current transactions) and multiplying this figure by the number of days in the billing cycle. To get the "Average daily balance," we take the beginning account balance each day, add any new advances or debits, and subtract any payments or credits and the last unpaid INTEREST CHARGE. This gives us the daily balance. Then we add all of the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "Average daily balance."

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#### Billing rights summary

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#### Change of address

How to Reconcile Your Account	Outstanding Checks and Other Debits (Section A)				
List the new balance of your account from your latest statement here:		Date/Check #	Amount	Date/Check #	Amount
	WE STATE		77700		
<ol><li>Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record</li></ol>					
the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:				1	
3. Subtract the amount in line 2 above from the amount in line 1					
above and enter the total here;					
Record any outstanding credits in section B. Record the transaction					
date, credit type and the credit amount. Add up all of the credits and enter the sum here:	72.7	Outstandi	ng Deposits ar	d Other Credits (Se	ection B)
5. Add the amount in line 4 to the amount in line 3 to find your		Date/Type	Amount	Date/Type	Amount
balance. Enter the sum here. This amount should match the balance in your register.					
For more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-5:					

785-24-01-00 80125 2 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

## Your account statement

For 06/30/2017

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(80 (80

(800) BANK-BBT or (800) 226-5228

You've built a solid business network.

Now BB&T introduces a way to make it work for you:

Refer up to 4 businesses and receive \$400! \* Refer fellow businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

To participate in this incentive program, stop by your closest local financial center to pick up a registration form. Visit us online at BBT.com/Business for more information or call us at 800-BANK-BBT.

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### **BUSINESS VALUE**

#### Account summary

Your previous balance as of 05/31/2017	\$4,901.24
Checks	- 1,317.22
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 2,865.50
Your new balance as of 06/30/2017	= \$6,449.52

#### Checks

DATE CHECK #		AMOUNT(\$)
06/09	152	277.22
06/08	* 170	1,040.00

Total checks = \$ 1,317.22

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
06/06	COUNTER DEPOSIT	280.00
06/12	COUNTER DEPOSIT	415.50
		continued

<sup>\*</sup> indicates a skip in sequential check numbers above this item



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BB&T Liability Risk Management

P.O. Box 996

Wilson, NC 27894-0996

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#### Billing rights summary

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Wilson, NC 27894-0200

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#### Change of address

How to Reconcile Your Account	How to Reconcile Your Account			Outstanding Checks and Other Debits (Section A)			
	263 2 2	Date/Check #	Amount	Date/Check #	Amount		
List the new balance of your account from your latest statement here:	**************************************			<del> </del>			
<ol><li>Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record</li></ol>					1		
the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:	SE STATE						
3. Subtract the amount in line 2 above from the amount in line 1							
above and enter the total here:	Company of the Compan						
4. Record any outstanding credits in section B. Record the transaction							
date, credit type and the credit amount. Add up all of the credits and enter the sum here:	7	Outstandi	ng Deposits ar	d Other Credits (Se	ection B)		
5. Add the amount in line 4 to the amount in line 3 to find your	7	Date/Type	Amount	Date/Type	Amount		
balance. Enter the sum here. This amount should match the balance in your register.	2002, 954, 997			-			
For more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-5.							



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## Your account statement

For 07/31/2017

## Contact us



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(800) BANK-BBT or (800) 226-5228

You've built a solid business network.

Now BB&T introduces a way to make it work for you:

Refer up to 4 businesses and receive \$400! \* Refer fellow businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

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#### **BUSINESS VALUE**

#### **Account summary**

Your previous balance as of 06/30/2017	\$6,449.52
Checks	- 2,383.72
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,260.00
Your new balance as of 07/31/2017	= \$5,325.80

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
07/07	153	1,822.50	07/07	155	265.72	07/25	* 158	245.50
07/10	154	50.00						
* indicate	es a skip in seque	ntial check numbers a	bove this ite	m		Total ch	necks	= \$2.383.72

## Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
07/05	COUNTER DEPOSIT	140.00
07/21	COUNTER DEPOSIT	700.00
0.721	000111211021.0011	700.

continued



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**Member FDIC** 

#### Billing rights summary

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#### Change of address

How to Reconcile Your Account	Outstanding Checks and Other Debits (Section A)				
List the new balance of your account from your latest statement here: .		Date/Check #	Amount	Date/Check #	Amount
<ol> <li>Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:</li> </ol>					
3. Subtract the amount in line 2 above from the amount in line 1 above and enter the total here:  Output  Description:					
<ol> <li>Record any outstanding credits in section B. Record the transaction date, credit type and the credit amount. Add up all of the credits and enter the sum here:</li> </ol>		Outstandi	ng Denosits a	nd Other Credits (Se	ection B)
5. Add the amount in line 4 to the amount in line 3 to find your		Date/Type	Amount	Date/Type	Amount
balance. Enter the sum here. This amount should match the balance in your register.					
or more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-5:					



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## Your account statement

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For 08/31/2017

Now BB&T introduces a way to make it work for you:

Refer up to 4 businesses and receive \$400! \* Refer fellow businesses to open their first BB&T business checking account and you each receive \$100 deposited directly into your business checking accounts once offer requirements are met.

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#### **BUSINESS VALUE**

#### **Account summary**

Your previous balance as of 07/31/2017	\$5,325.80		
Checks	- 4,661.00		
Other withdrawals, debits and service charges	- 0.00		
Deposits, credits and interest	+ 810.00		
Your new balance as of 08/31/2017	= \$1,474.80		

#### Checks

DATE CHECK # 08/07 156 08/07 157		AMOUNT(\$)
		440.00
		1,760.00
08/02 *159		33.78

135.50
1,000.00

DATE	CHECK #	AMOUNT(\$		
08/07	162	291.72		
08/09	163	1,000.00		

Total chacks	= \$4 661 DC

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
08/01	COUNTER DEPOSIT	390.00
08/22	COUNTER DEPOSIT	420.00
Total de	eposits, credits and interest	= \$810.00

Total deposits, credits and interest

<sup>\*</sup> indicates a skip in sequential check numbers above this item



785-24-01-00 80125 3 C 001 28 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

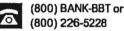
## Your account statement

For 09/29/2017

### Contact us



BBT.com



You've built a solid business network.

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It is a total of \$400 in a total to a submit a valid form W-8, NRA Certification Statement and a copy of their passport to BB&T by the time the account is reviewed for incentive eligibility as described above.

BB&T, Member FDIC.

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#### ■ BUSINESS VALUE 200



#### **Account summary**

Your previous balance as of 08/31/2017	\$1,474.80		
Checks	- 1,908.60		
Other withdrawals, debits and service charges	- 0.00		
Deposits, credits and interest	+ 2,410.00		
Your new balance as of 09/29/2017	= \$1,976.20		

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
09/05	164	36.87	09/11	165	321.73	09/18	166	1,550.00
						Total checks		= \$1,908.60

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
09/01	COUNTER DEPOSIT	280.00
09/08	COUNTER DEPOSIT	280.00
09/13	COUNTER DEPOSIT	140.00
09/14	COUNTER DEPOSIT	450.00
		continued

......



Member FDIC

For general questions/comments or to report errors about your statement or account, please call BB&T Phone24 at 1-800-BANK BBT (1-800-226-5228) 24 hours a day, 7 days a week. BB&T Phone24 Client Service Associates are available to assist you from 6 a.m. until midnight ET. You may also contact your local BB&T financial center. To locate a BB&T financial center in your area, please visit BBT.com.

#### Electronic fund transfers

In case of errors or questions about your electronic fund transfers, if you think your statement or receipt is wrong or if you need more information about a transfer on the statement or receipt, contact us as soon as possible. You may write to us at the following address:

**BB&T Liability Risk Management** 

P.O. Box 996

Wilson, NC 27894-0996

You may also call BB&T Phone24 at 1-800-BANK BBT or visit your local BB&T financial center. We must hear from you no later than sixty (60) days after we sent you the FIRST statement on which the error or problem appeared. Please provide the following information:

- Your name and account number
- Describe the error or transfer you are unsure about, and explain in detail why
  you believe this is an error or why you need more information
- The dollar amount of the suspected error

We will investigate your complaint/concern and promptly take corrective action. If we take more than ten (10) business days to complete our investigation, your account will be credited for the amount you think is in error, minus a maximum of \$50 if we have a reasonable basis to believe that an unauthorized electronic fund transfer has occurred. This will provide you with access to your funds during the time it takes us to complete our investigation. You may have no liability for unauthorized Check Card purchases, subject to the terms and conditions in the current BB&T Electronic Fund Transfer Agreement and Disclosures. If you have arranged for direct deposit(s) to your account, please call BB&T Phone24 at 1-800-BANK BBT to verify that a deposit has been made.

If your periodic statement shows transfers that you did not make, tell us at once. If you do not inform us within sixty (60) days after the statement was mailed to you, you may not get back any money you lost after sixty (60) days. This will occur if we can prove that we could have stopped someone from taking the money if you had informed us in time. If a good reason kept you from informing us, we will extend the time periods.

#### Important information about your Constant Credit Account

Once advances are made from your Constant Credit Account, an INTEREST CHARGE

will automatically be imposed on the account's outstanding "Average daily balance." The INTEREST CHARGE is calculated by applying the "Daily periodic rate" to the "Average daily balance" of your account (including current transactions) and multiplying this figure by the number of days in the billing cycle. To get the "Average daily balance," we take the beginning account balance each day, add any new advances or debits, and subtract any payments or credits and the last unpaid INTEREST CHARGE. This gives us the daily balance. Then we add all of the daily balances for the billing cycle and divide the total by the number of days in the billing cycle. This gives us the "Average daily balance."

#### Billing rights summary

#### In case of errors or questions about your Constant Credit statement

If you think your statement is incorrect, or if you need more information about a Constant Credit transaction on your statement, please call 1-800-BANK BBT or visit your local BB&T financial center. To dispute a payment, please write to us on a separate sheet of paper at the following address:

BankCard Services Division

P.O. Box 200

Wilson, NC 27894-0200

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  you believe this is an error or why you need more information
- The dollar amount of the suspected error

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#### Mail-in deposits

If you wish to mail a deposit, please send a deposit ticket and check to your local BB&T financial center. Visit BBT.com to locate the BB&T financial center closest to you. Please do not send cash.

#### Change of address

How to Reconcile Your Account	Outstan	ding Checks an	d Other Debits (See	ction A)	
List the new balance of your account from your latest statement here:		Date/Check #	Amount	Date/Check #	Amount
2. Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:					
3. Subtract the amount in line 2 above from the amount in line 1 above and enter the total here:					
4. Record any outstanding credits in section B. Record the transaction date, credit type and the credit amount. Add up all of the credits and enter the sum here:		Outstand	ing Deposits ar	nd Other Credits (S	ection B)
5. Add the amount in line 4 to the amount in line 3 to find your balance. Enter the sum here. This amount should match the balance in your register.	2.41	Date/Type	Amount	Date/Type	Amount
For more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-52					



785-24-01-00 80125 4 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

## Your account statement

For 10/31/2017

### Contact us



AMOUNT(\$)

BBT.com

CHECK #

DATE

(800) BANK-BBT or (800) 226-5228

#### **Beware of Phishing and Spoofing Emails**

Just a friendly reminder, BB&T never uses email to obtain personal information. Watch out for emails that try to trick you into clicking a link or calling a hotline to update your confidential information like account numbers, payment card details or your Social Security number. If you receive an urgent email like this, DO NOT click links, open attachments or provide confidential information to the hotline. Simply delete it without responding. If you revealed your account details to a phishing email, call 800-BANK-BBT (800-226-5228) for assistance.

Learn more security tips at BBT.com/Security.

BB&T, Member FDIC.

#### ■ BUSINESS VALUE 200

CHECK #

#### **Account summary**

Your previous balance as of 09/29/2017	\$1,976.20
Checks	- 1,877.77
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,250.00
Your new balance as of 10/31/2017	= \$1,348.43

AMOUNT(\$)

DATE

#### Checks DATE

10/12	167	1,000.00	10/11	169	49.00	10/11 *171	530.00
10/16	168	298.77					
* indical	tes a skip in seque	ential check numbers a	bove this ite	m		Total checks	= \$1,877.77
Deposit	ts, credits and in	terest					
DATE	DESCRIPTION						AMOUNT(\$)
10/03 COUNTER DEPOSIT							520.00
10/10 COUNTER DEPOSIT							140.00
10/13	COUNTER DEF	POSIT					165.00
10/18	COUNTER DEF	POSIT	76-75	***************************************			145.00
10/31	COUNTER DEF	POSIT					280.00
Total de	Total deposits, credits and interest						= \$1,250.00

CHECK #

AMOUNT(\$)



785-24-01-00 80125 4 C 001 29 S 68 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

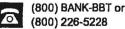
## Your account statement

For 11/30/2017

## Contact us



BBT.com



#### **Small Business Saturday**

BB&T will once again support our clients by promoting Small Business Saturday on Nov. 25. Keep an eye out for our social media posts as we encourage our followers to #Shopsmall this holiday season. We appreciate you being a BB&T client and wish you the best as you close out what we hope is a successful 2017. We also look forward to continuing to support your business as you grow in the coming year.

BB&T, Member FDIC.

## ■ BUSINESS VALUE 200

#### **Account summary**

Your previous balance as of 10/31/2017	\$1,348.43		
Checks	- 1,820.50		
Other withdrawals, debits and service charges	- 0.00		
Deposits, credits and interest	+ 2,520.00		
Your new balance as of 11/30/2017	= \$2,047.93		

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
11/13	172	316.38	11/15	174	35.75	11/21	175	36.87
11/21	173	1,431.50				WAY 75		
-						Total ch	ecks	= \$1,820.50

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
11/14	COUNTER DEPOSIT	980.00
11/17	COUNTER DEPOSIT	420.00
11/17 11/20	COUNTER DEPOSIT	420.00
11/24	COUNTER DEPOSIT	280.00
11/29	COUNTER DEPOSIT	420.00
Total d	deposits, credits and interest	= \$2,520.00

## We heard your feedback, and we're reintroducing the combined balance qualifier!

We appreciate the feedback we received about the recent account qualifier changes and are pleased to announce effective Oct. 1, 2017, we're adding the combined balance qualifier back to our list of ways you can avoid the \$12 monthly maintenance fee for BB&T Business Value 200 and Basic Public Fund Checking accounts.



For general questions/comments or to report errors about your statement or account, please call BB&T Phone24 at 1-800-BANK BBT (1-800-226-5228) 24 hours a day, 7 days a week. BB&T Phone24 Client Service Associates are available to assist you from 6 a.m. until midnight ET. You may also contact your local BB&T financial center. To locate a BB&T financial center in your area, please visit BBT.com.

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Member FDIC

#### Billing rights summary

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P.O. Box 200

Wilson, NC 27894-0200

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#### Change of address

How to Reconcile Your Account	Outstanding Checks and Other Debits (Section A)				
List the new balance of your account from your latest statement here:		Date/Check #	Amount	Date/Check #	Amount
<ol><li>Record any outstanding debits (checks, check card purchases, ATM withdrawals, electronic transactions, etc.) in section A. Record the transaction date, the check number or type of debit and the debit amount. Add up all of the debits, and enter the sum here:</li></ol>					
<ol> <li>Subtract the amount in line 2 above from the amount in line 1 above and enter the total here:</li> </ol>					
4. Record any outstanding credits in section B. Record the transaction date, credit type and the credit amount. Add up all of the credits and enter the sum here:		Outstand	ing Deposits a	nd Other Credits (So	ection B)
<ol> <li>Add the amount in line 4 to the amount in line 3 to find your balance. Enter the sum here. This amount should match the balance in your register.</li> </ol>		Date/Type	Amount	Date/Type	Amount
For more information, please contact your local BB&T relationship man BBT.com, or contact BB&T Phone24 at 1-800-BANK BBT (1-800-226-5.					



785-24-01-00 80125 3 C 001 29 S 66 002 NIXUTIL SANITATION ASSOCIATION 2047 LINCOLN DR INDEPENDENCE KY 41051-9761

## Your account statement

Contact us



BBT.com

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(800) BANK-BBT or (800) 226-5228

BB&T is pleased to announce that beginning on Dec. 11, 2017, the available balance in your account will be updated multiple times throughout the day upon receipt of a same-day, electronic, direct deposit transaction. If a same-day direct deposit is received to your account by 5 p.m. local time, Monday through Friday, on regular business days you will have intraday access to these funds earlier in the day which allows you to better manage your cash positioning.

Please feel free to contact your local financial center or call Phone24 at 800-BANK-BBT (800-226-5228) if you have any questions.

Thank you for banking with BB&T.

BB&T, Member FDIC

For 12/29/2017

### **BUSINESS VALUE**

## Account summary

Your previous balance as of 11/30/2017	\$2,047.93
Checks	- 1,475.18
Other withdrawals, debits and service charges	- 0.00
Deposits, credits and interest	+ 1,730.00
Your new balance as of 12/29/2017	= \$2,302.75

#### Checks

DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)	DATE	CHECK #	AMOUNT(\$)
12/07	176	339.68	12/08	177	1,000.00	12/26	178	135.50
						Total ch	ecks	= \$1,475.18

#### Deposits, credits and interest

DATE	DESCRIPTION	AMOUNT(\$)
12/01	COUNTER DEPOSIT	730.00
12/05	COUNTER DEPOSIT	420.00
12/12	COUNTER DEPOSIT	300.00
12/26	COUNTER DEPOSIT	280.00
Total de	eposits, credits and interest	= \$1,730,00



MATTHEW G.

## **ENERGY AND ENVIRONMENT CABINET** DEPARTMENT FOR ENVIRONMENTAL PROTECTION

AARON B. KEATLEY

300 SOWER BOULEVARD

SOC 477C FRANKFORT, KENTUCKY 40601

2-242
July 28, 2017

40 Ce -8788-

USEID: DBNAUTIGAN 42

Harold Brautigan

**Bel Air Subdivision** 2048 Lincoln Dr

Independence, KY 41051

https://gateway. By Re: KPDES Application Notice of Deficiency KPDES No.: KY0075833
AI ID: 2443

Kenton County, Kentucky

Dear Mr. Brautigan:

Your Kentucky Pollutant Discharge Elimination System (KPDES) permit application for the above-referenced facility was received by the Division of Water on July 13, 2017. A completeness review of your permit application has been conducted and the application has been determined to be incomplete. Please complete the deficiencies listed below and return to me at the following address within fifteen (15) days of the date of this letter. Ly State Successor

Division of Water, Surface Water Permits Branch

ATTN: Ms. Erin Lawson 300 Sower Blvd, 3rd Floor 7//7 Frankfort, Kentucky 40601

Please complete Primary Contact Title on Form 1 Section C.

- Please provide DMR Mailing Address on Form 1 Section VI-B. Name and contact information for the party responsible for submitting DMRs is required.
- 3. Please complete the Certification Email Address on Form 1 Section VIII.
- Please indicate The design capacity of the treatment system on Form SC Section II-C.
- Please provide Method used to obtain latitude and longitude on Form SC Section III.
- Please provide Area Served on Form SC Section X.
- Please provide Cooling Water Additives and Their Components on Form SC Section XI. If there are none, a response of N/A is sufficient.
- 8. As of June 28, application fee requirements have changed. The entire permit fee is now due at the time of submittal. Please submit the permit fee of \$2760, \$440 has already been applied to the total fee of \$3200. If you have any questions regarding fees or wish to pay online, please contact me at the number below.

Failure to respond within thirty (30) days may result in the Cabinet returning your application to you and retaining filing fees that have been paid, as per 401 KAR 5:300, Section 2(2). If you have any questions concerning this request, please contact me at (502) 782-7002 or by e-mail at Erin.Lawson@ky.gov.

Sincerely,



## COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE FRANKFORT, KY 40619

NOTICE DATE 06/30/2017

PERIOD 07/01/2017-06/30/2018

CASE TAX

000048000033 PUBLIC SERVICE COMMISSION

**ASSESSMENT** 

NOTICE # 108772354 RETURN DUE 07/31/2017 TAXPAYER-ID 000048000

TAXPAYER NAME NIXUTIL SANITATION.

#### EXPLANATION OF NOTICE

ANNUAL PUBLIC SERVICE COMMISSION ASSESSMENT FOR THE ABOVE PERIOD.

MESSAGES: PENALTIES PROVIDED PER KRS 278.990(3) INCLUDE \$1,000, PLUS \$25 PER DAY FOR EACH DAY THE ASSESSMENT REMAINS UNPAID. KRS 131.440(1)(A) IMPOSES A COST OF COLLECTION FEE FOR TWENTY-FIVE PERCENT (25%) ON ALL ASSESSMENTS WHICH ARE OR BECOME DUE AND OWING TO THE DEPARTMENT. IF THE AMOUNT DUE IS NOT PAID BY JULY 31, 2004, THESE PENALTIES AND FEES MAY BE ADDED TO THIS ASSESSMENT AND REFERRED FOR ENFORCED COLLECTION ACTION.

> QUESTIONS CONCERNING THIS ASSESSMENT MAY BE DIRECTED TO THE PUBLIC SERVICE COMMISSION, 211 SOWER BOULEVARD, PO BOX 615, FRANKFORT, KENTUCKY 40602, TELEPHONE NUMBER (502) 564-3940.
> KRS 278.130 PROVIDES FOR THE ANNUAL ASSESSMENT OF PUBLIC

SERVICE COMPANIES.

GROSS INTRASTATE RECEIPTS

TAX LIABILITY

TOTAL LIABILITY

20,865.00 TAX LIABILITY 50.00 TOTAL LIABILITY

<>< EXPLANATION OF NOTICE CONTINUED ON NEXT PAGE >>>>

DETACH VOUCHER AND RETURN WITH PAYMENT. MAKE CHECK PAYABLE TO KENTUCKY STATE TREASURER.



1045 Eaton Drive
Ft. Wright, Kentucky 41017-9681
859-578-7450
Office Hours: 8:00 am to 4:30 pm Monday - Friday
www.sd1.org

Service	Address
11961 CAT	TALINA DR
From	To
11/01/2016	01/31/2017
Mailing	Address

NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

: Account No.	E-ID
	D991093
Due Date for	Amount Due
Current Charges	After Due Date
03/15/2017	\$43.83

Amount Due

\$40.35

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Service 1	Previous Reading of Impervious Area	or Current Readin Gross ERU's		
Past Due Balance-PAY IMMEDIATELY Stormwater-COMM/Regular Charge Sales Tax	5802.06	2.3	2.3	\$3.48 \$34.78 \$2.09
Previous Balances Net Payments	Adjustments	Past Due Balances	Current Charges	Amount Due 1
\$77.22 (\$77.22)	\$3.48	\$3.48	\$36.87	\$40.35

Sign up to receive an-e-bill by registering online with Paymentus. Visit www.sd1,org paymentoptions for more information.



1045 Eaton Drive Ft. Wright, Kentucky 41017-9681 859-578-7450 Office Hours: 8:00 am to 4:30 pm Monday - Friday www.sd1.org

Sèrvice	Address
	TALINA DR
From L	To
02/01/2017	04/30/2017
Mailing Mailing	Address

#### NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-ID.
	D991093
Due Date for	Amount Due
Current Charges	After Due Date
06/10/2017	\$40.35

Amount Due \$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Sen	/ice	Previous Reading or Impervious Area	Current Readin		Amount
Stormwater-COMM/ Sales Tax	Regular Charge	5802:06	2.3	2.3 0 151 5 12717 36.8/	\$34.78 \$2.09
	<u> </u>			36.8/	
Previous Balances	Net Payments	Adjustments P	ast Due Balances	Current Charges	Amount Due
\$40.35	(\$40.35)	\$0.00	\$0.00	\$36.87	\$36.87
	<b>5.</b>		_arini		



1045 Eaton Drive
Ft. Wright, Kentucky 41017-9881
859-578-7450
Office Hours: 8:00 am to 4:30 pm Monday - Friday
www.sd1.org

Service	Address
11961 CAT	
From 😃 😘	To #
05/01/2017	07/31/2017
Mailing	2291hhA

NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-ID
	D991093
Due Date for	Amount Due
Current Charges	After Due Date
09/11/2017	\$40.35

Amount!Due 4.	\$36.87
---------------	---------

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Serv	ļce	Previous Reading of Impervious Area	Current Reading		
Stormwater-COMM/ Sales Tax	Regular Charge	5802.06	2.3 viiii 12.4 viiii 12.5 viiii 12.5 viiii 12.5 viiii 12.5 viiii 12.5 viii 1	2.3	\$34.78 \$2.09
	Net Payments	Adjustments	Past Due Balances	<b>Current Charges</b>	ন Amount Due
Previous Balances					





1045 Eaton Drive Ft. Wright, Kentucky 41017-9881 859-578-7450 Office Hours: 8:00 am to 4:30 pm Monday - Friday www.sd1.org

Service Address				
	TALINA DR			
From vas.	12 To			
08/01/2017	10/31/2017			
4 Mailing	Address 👙			

NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-JD
	D991093
Due Date for	Amount Due
Current Charges	After Due Date
12/13/2017	\$40.35



\$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

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Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Service	Previous Reading of Impervious Area			
Stormwater-COMM/Regular Charge Sales Tax	5802.06	2.3 	2.3	\$34.78 \$2.09
	30,20 CR	76.		
	100 m			
Previous Balances Net Payments	Adjustments	Past Due Balances	Current Charges	Amount Due
\$36.87 (\$36.87)	\$0.00	\$0.00	\$36.87	\$36.87







ACCOUNT NUMBER ACCOUNT NAME SERVICE ADDRESS

Main Office 8205 Highway 127 N P.O. Box 400 Owenton, Kentucky 40359-0400 800/372-7612 Fax 502/484 -2661 www.owenelectric.com

Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

METER NUMBER BILL DATE

		4
A Touchstone	Energy* Cooperative	X

and the second s	NIXUTIL S	SANITATION	ASSOC IN	C	11968	CATALI	NA DRIVE -	SEWER		175414		09/28/17
SERVICE PER	OD TO	NO. Days	ME PREVIOUS	TER RE	1995, 42-5-5	CODE	METER MULTIPLIER	BILLE DEMAN	- C-20-1	KĮLOWATT Hours		CHARGES
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-0.005590	. —	I FUEL ADJ	USTMENT							2787	1	-15.58
ENVIRONM			11.930%								}	29.17
LOCAL SCH		5 33/27/30									1	8.21
STATE SAL											1	16.91
TOTAL CURREN	a ser ann conservations of the se	10/16/17									ł	298.77
PREVIOUS AMO											1	321.73
THANK YOU FO		YMENT (S)									]	-321.73
TOTAL AMOUN	T DUE										ì	298.77
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COMPARISONS	DAYS SERVICE	A KEAN S	AVG. KWHIDAY	Tak Zov	CLE	1.07.112	A deg Parties	Charles Same	<u> </u>		<del> </del>	\$000 77
URRENT BILLING PERIOD	32	2787	87		19	Access to the second	Card Start of States and		A suboti a tito a ti	ALANCE		\$298.77
REVIOUS BILLING PERIOD	30	2926	98		CLASS	CURREN	T BILL DUE	10/16/17	BILL	3 DELINQU	ENT AF	TER DUE DAT
ME PERIOD LAST YEAR	32	3193	100	3	52			AFTER I	DUE DA	TE PAY		\$312.45
Your Electrici	y Use Over The L				حتت	L					ــــــــــــــــــــــــــــــــــــــ	

IMPORTANT INFORMATION

Due date is for CURRENT month's bill only. Any account with a previous amount due is subject to disconnection.

Please allow ample time for delivery before the due date when mailing your payment. Write account number on your check.

Return the bottom portion of this bill with your payment.

1.064

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E-Bifling (Eliminates Paper Bifl Levelized Budget Bifling EnviroWatts Green Power HomeGard Surge Protection Home Energy Analysis Energy Efficiency Programs

PLEASE NOTE THE CHANGE IN ADDRESS FOR PAYMENT REMITTANCES TO - P O BOX 9001046, LOUISVILLE, KY 40290-1046 - TO ENSURE

YOUR PAYMENT IS RECEIVED AND POSTED PROMPTLY! THANK YOU.



Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

A Touchstone Energy' Cooperative

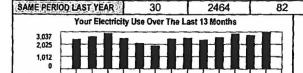
ACCOUNT NUMBER		ACCOUNT N	AME		SERVICE	ADDRESS		METER NUMBER	BILL DATE
	NIXUTIL S	SANITATIO	N ASSOC INC	11968	CATALINA	A DRIVE -	SEWER	175414	10/30/17
SERVICE PER	IOD - TO	NO. DAYS	MET Previous	er reading Present	CODE	METER MULTIPLIER	BILLED DEMAND	KILOWATT HOURS	CHARGES
-0.005060 ENVIRONM LOCAL SC	IENTAL SUR HOOL TAX- : LES TAX- 6% NT BILL DUE DUNT DUE DR YOUR PA	3% 5 E 11/17/17	9.610%	41287	R	) or	316	3037 3037	279.74 -15.33 25.44 8.69 17.97 316.38 298.77 -298.73 316.38
XT METER READING D	C Contain	in some all the	CELOCATION		1137112	But with Law	74.5744.60.774	9) 363-5263	
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG KWH/DAY	CYCLE 610		TOTAL	L ACCOUN	T BALANCE	\$316.38

619

RATE CLASS

52

3



30

32

CURRENT BILLING PERIOD

PREVIOUS BILLING PERIOD

WINTER HEATING SEASON IS COMING SOON - BE PROACTIVE AND HAVE YOUR HEATING SYSTEM CHECKED BY A PROFESSIONAL TO ENSURE WORKING PROPERLY AND EFFICIENTLY. THANK YOU.

#### IMPORTANT INFORMATION

3037

2787

101

87

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\$330.86

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EnviroWatts Green Power
HomeGard Surge Protection
Home Energy Analysis
Energy Efficiency Programs

CURRENT BILL DUE 11/17/17 BILL IS DELINQUENT AFTER DUE DATE

AFTER DUE DATE PAY



CODE

R

MULTIPLIER

1

Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

BILL DATE

11/29/17

300.88

-26.84

37.08

9.33

19.23

339.68

316.38

-316.38

339.68

CHARGES

A Touchstone Energy Cooperative METER NUMBER ACCOUNT NUMBER ACCOUNT NAME SERVICE ADDRESS **NIXUTIL SANITATION ASSOCING** 11968 CATALINA DRIVE - SEWER 175414 METER READING SERVICE PERIOD METER BILLED KILOWATT-NO.

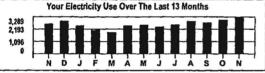
44576

FROM то DAYS PREVIOUS PRESENT 11/27/17 10/26/17 32 41287 -0.008160 PER KWH FUEL ADJUSTMENT **ENVIRONMENTAL SURCHARGE** 13.530% **LOCAL SCHOOL TAX-3%** STATE SALES TAX-6%

**TOTAL CURRENT BILL DUE 12/17/17** PREVIOUS AMOUNT DUE THANK YOU FOR YOUR PAYMENT (S) **TOTAL AMOUNT DUE** 

@ de 17 4/17

NEXT METER READING DATE 12/27/17 SERVICE LOCATION					7141	1137112 TELEPHON	37112 TELEPHONE (859) 363-5263				
	DAYS SERVICE	TOTAL KWH	AVG. KWH/DAY	ÇY	CLE	TOTAL AC	COUNT BALANCE	\$339.68			
CURRENT BILLING PERIOD	32	3289	103	6	19	CURRENT BILL DUE 12/1		ENT ACTED DUE DATE			
PREVIOUS BILLING PERIOD	30	3037	101	RATE	CLASS	THE RESERVE CALLED THE AND THE AND DESCRIPTION OF THE PARTY OF THE PAR	THE PROPERTY AND ADDRESS OF THE PARTY AND ADDR	ENT AFTER DUE DA LE			
8AME PERIOD LAST YEAR	28	2664	95	3	52	AFTI	ER DUE DATE PAY	\$355.23			



OWEN ELECTRIC'S OFFICES WILL BE CLOSED DEC. 25th, DEC. 26th FOR CHRISTMAS HOLIDAY AND JAN. 1st, JAN. 2nd FOR NEW YEAR HOLIDAY! FOR EMERGENCY PLEASE CALL 800-37-7612.

DEMAND

HOURS

3289

3289

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Home Energy Analysis

**Energy Efficiency Programs** 



Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

- Todobione C	nergy Cooperat	INE VENS							
ACCOUNT NUMBER	18/4	ACCOUNT N	AME			SERVICE A	DDRESS	METER NUMBER	BILL DATE
	NIXUTIL S	SANITATIO	N ASSOC IN	С	11968	CATALINA	DRIVE - SEWER	175414	12/29/16
SERVICE PERI	OD TO	NOL DAYS	PREVIOUS -	4 112	EADING SENT		METER , BILL JLTIPLIER , DEM		CHARGES
11/23/16 1	2/27/16	34	12859	157	796	R	1	2937	278.58
-0.005730	PER KWH	FUEL ADJ	USTMENT					2937	-16.83
ENVIRONM	and the second s		10.070%				,20		26.36
REFUND OF					/	DL.	13.4		-32.33
LOCAL SCH					(	Jak	2-11		8.64
STATE SAL						C 1	130	IX.	17.81
TOTAL CURREN		01/20/17				1			282.23
PREVIOUS AMO THANK YOU FO		VMENT (C)	v						287.94
TOTAL AMOUN		CHVIENT (S)	t.						282.23
	,	v	ä						
IEXT METER READING DA	TE 01/25/	17 SERVI	CE LOCATION		7141	1137048	TELEPHONE	(859) 363-5263	
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG. KWH/DAY	THE STATE OF	YCLE		TOTAL ACC	OUNT BALANCE	\$282.23
URRENT BILLING PERIOD	34	2937	86		619	CURRENTR	ACCUSE OF STREET	The second secon	ENT AFTER DUE DAT
A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2 A 2									
PREVIOUS BILLING PERIOD SAME PERIOD LAST YEAR	28 33	2664 2441	95 74	RATE 3	CLASS 52	4 2		DUE DATE PAY	\$295.01

3,193 2,129 OWEN ELECTRIC'S OFFICES WILL BE CLOSED FOR THE NEW YEAR HOLIDAY DEC. 30 AND JAN 2. OUR VIRTUAL OFFICE OPEN 24/7 AT owenelectric.com; CALL 800.372.7612 FOR EMERGENCY!

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Monday - Friday

A Touchstone Energy Cooperative

ACCOUNT, NUMBER		ACCOUNT NA	ME		SERVI	CE ADDRESS		METER NUMBER	BILL DATE
	NIXUTIL SANITATION A			C 1196	8 CATALII	NA DRIVE - S	EWER	175414	01/27/17
SERVICE PER	IOD TO	NO. Days	MET PREVIOUS	ER READING PRÉSENT	CQDE	METER MULTIPLIER	BILLED DEMAND	KILOWATT HOURS	CHARGES
-0.006610 ENVIRONM LOCAL SCH	ENTAL SUR HOOL TAX- ( ES TAX- 6% NT BILL DUE DUNT DUE DR YOUR PA	3% 5 E 02/16/17	11.760%	18327	R	1		2531 2531	243.5 -16.7 26.6 7.6 15.6 276.7 282.2 -282.2 276.7
XT METER READING D	ATE 02/23/	17 SERVI	CE LOCATION	714	11137048	TELEF	HONE (859	9) 363-5263	
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG. KWHIDAY	CYCLE	12.1 14.	TOTAL	ACCOUN	T BALANCE	\$276.7
RRENT BILLING PERIOD	29	2531	87	619	CURREN			LL IS DELINQUEN	TAFTER DUE DA
EVIOUS BILLING PERIOD	34	2937 2105	75	RATE CLASS	San Sand was			DATE PAY	\$289.4
ME PERIOD LAST YEAR	28	1 27/15							

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-TO CHECK BALANCE, MAKE PAYMENT, OR REVIEW ACCOUNT BILLING/USAGE HISTORY AT THEIR CONVENIENCE. CHECK IT OUT!

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ACCOUNT NUMBER		ACCOUNT NA	ME			SERVI	E ADDRESS		METER NUMBE	R BILL	DATE
	NIXUTIL S	SANITATIO	ASSOC IN	С	11968 CATALINA DRIVE			SEWER	175414	02/2	7/17
SERVICE PEI	RIOD TO	NO. DAYS	MET PREVIOUS	er re Pres	ADING :	CODE	METER MULTIPLIER	BILLEI DEMAN	worth the fact with the total the total total	CHARG	S
-0.003160 ENVIRONA LOCAL SC	MENTAL SUF HOOL TAX- LES TAX- 6% NT BILL DUE OUNT DUE OR YOUR PA	3% % E 03/17/17	6.540%	204	59	R	1 235 31	3/16	2132 2132		209.08 -6.74 13.23 6.47 13.32 235.36 276.73 276.73 235.36
EXT METER READING (	DATE 03/27/	17 SERVI	CELOCATION		7141	1137048	TELE	PHONE (	859) 363-5263		
COMPARISONS	DAYS SERVICE		AVG. KWH/DAY		CLE &		TOTAL	L ACCOL	INT BALANCE	\$2	235.36
CURRENT BILLING PERIOD PREVIOUS BILLING PERIOD	41	2132 2531	74 87	RATE:	19 CLASS	CURREN	T BILL DÚE	03/17/17	BILL IS DELINQU	ENT AFTER DU	JE DATI
METIONS BILLING FEMOL	23	2001	0/	TUNE	POLUGG	171277			UE DATE PAY		

Your Electricity Use Over The Last 13 Months

3,193 2,129

1,064

GO PAPERLESS WITH E-BILL STATEMENTS - OUR FREE ON-LINE BILLING SERVICE. ONCE ENROLLED, YOU WILL NO LONGER RECEIVE PAPER STATEMENTS. CALL 800-372-7612 FOR MORE INFO.

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Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

ACCOUNT NUMBER		ACCOUNT	NAME		SERVI	CÉ ADDRESS		METER NUMBER	ÉILL DATE
	NIXUTIL	SANITATIO	ON ASSOC INC	1196	8 CATALI	NA DRIVE - S	1,75414	05/30/17	
SERVICE P	ERIOD	NO.	METE	R READING		METER	BILLED	KILOWATT	CHARGES
FROM	TO or	DAYS	PREVIOUS	PRESENT	CODE	MULTIPLIER	DEMAND	HOURS,	
04/26/17	05/25/17	29	24920	27501	R	1		2581	247.84
-0.007920	PER KW	H FUEL AC	JUSTMENT					2581	-20.44
ENVIRON	IMENTAL SUI	RCHARGE	11.660%						26.51
LOCAL S	CHOOL TAX-	3%						1	7.62
STATE SA	ALES TAX- 69	<b>%</b>						1	15.69

TOTAL CURRENT BILL DUE 06/17/17	277.22
PREVIOUS AMOUNT DUE	269.91
THANK YOU FOR YOUR PAYMENT (S)	-269.91
TOTAL AMOUNT DUE	277.22
i	

NEXT METER READING D	ATE 06/27/	17 SERVI	CE LOCATION		7141	1137112	TELEPHONE	(859) 363-5263	1
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG. KWH/DAY	C	(CLES: 1).		TOTAL ACC	OUNT BALANCE	\$277.22
CURRENT BILLING PERIOD		2581	89	6	19	CHODENTON	DUE 06/17/	7 DULIONCULOU	ENT AFTER DUE DATE
PREVIOUS BILLING PERIOD	30	2523	84	RATE	CLASS	CURRENT BIL	- Bridger and	Martin The letter of the annual land of the land of th	CNI AFTER DUE DATE
SAME PERIOD L'AST YEAR	29	2117	73	3	52	1	AFTER	<b>DUE DATE PAY</b>	\$289.91
		D. Alexander 197							



SUMMER IS ALMOST HERE. Time to ensure your air conditioning system is ready: clean or replace filters, clean coils & clear debris from base of outside units.

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Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

ACCOUNT NUMBER	Profession and	ACCOUNT N	ME ATTEN		6.7.16.7	SERVICI	E ADDRESS	NEW MA	34 M.C	METER NUMBER	BILL DATE
ACCOUNT NOTIFIER	NIXUTIL :	The state of the s	N ASSOC INC		11968	CATALIN	the many desired and the	The state of the same of the same	TEGET TE	175414	07/28/17
SERVICE PER		NO. DAYS	MÈT		ADING		METER Multiplie	BILL	ED	KILOWÁTT HOURS	CHARGES
06/27/17 0 -0.006980 ENVIRONM LOCAL SCH STATE SAL TOTAL CURREI PREVIOUS AMO THANK YOU FO TOTAL AMOUN	ENTAL SUF HOOL TAX- ES TAX- 6% NT BILL DUE DUNT DUE PR YOUR PA	3% % ≣ 08/17/17	14.670%	325	537	R	1			2621 2621	251.3 -18.2 34.1 8.0 16.5 291.7 265.7 -265.7
, in			201.8/3	3/1	1	169-		£			· ·
XT METER READING D	1.644	CLULAS TOU THE PERSON	LOCATION			1137112	\$107,000	EPHONE	<u> </u>	363-5263	
COMPARISONS		STOTAL KWH		to Ad Algertin - B.	CLE					BALANCE	\$291.7
IRRENT BILLING PERIOD	29	2621	90		19	OHOOCHE	DUL DIE	00/47/4	7 DIL	IC BELLIOUEL	IT AFTER DUE DA
REVIOUS BILLING PERIOD	33	2415	73	DATE	CLASS	CORKENI	DILL UU	E 100/1//1	1 DILL	. 19 DELINGUES	H AFIEK DUE DA

Your Electricity Use Over The Last 13 Months
3,193
2,129
1,064
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J A S O N D J F M A M J J

PLEASE NOTE THE CHANGE IN ADDRESS FOR PAYMENT REMITTANCES TO - P O BOX 9001046, LOUISVILLE, KY 40290-1046 - TO ENSURE YOUR PAYMENT IS RECIEVED AND POSTED PROMPTLY! THANK YOU.

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Monday - Friday

ACCOUNT NUMBER		ACCOUNT N	AME	27. 73.33	SERVIC	E ADDRESS		METER NUMBER	BILL DATE
	NIXUTIL S	ANITATIO	N ASSOC IN	C 1196	8 CATALIN	NA DRIVE -	SEWER	175414	06/29/17
SERVICE PER	RIOD TO	NO. DAYS	PREVIOUS	PRESENT	CODE	METER MULTIPLIER	BILLED DEMAND	KILOWATT HOURS	CHARGES
-0.004950 ENVIRONN LOCAL SC	DUNT DUE OR YOUR PA	CHARGE % 07/17/17	9.850%	29916	R	1 CP	15/17	2415 2415 12)	233.5 <sup>-1</sup> -11.95 21.82 7.30 15.0 <sup>4</sup> 265.72 277.22 -277.22

NEXT METER READING D	ATE 07/26/	17 SERVI	CE LOCATION		7141	1137112 TELEPHONE	(859) 363-5263	
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG. KWH/DAY	ν. '÷ <b>C</b> \	CLE,	TOTAL ACC	OUNT BALANCE	\$265.72
CURRENT BILLING PERIOD	33	2415	73		19	CURRENT BILL DUE 07/17		AT ACTED DUE DATE
PREVIOUS BILLING PERIOD	29	2581	89	RATE	CLASS	Marie and the contest the state of	TO SER TO LOCATE AND CONTRACTOR	الماسور ويدام المواجر الدوا فكوافه المانية الماسية الماسية والمساورة
SAME PERIOD LAST YEAR	33	2757	84	3	52	AFTEI	R DUE DATE PAY	\$277.88
Your Electrici	ty Use Over The La	ast 13 Months						



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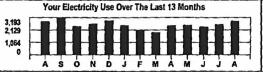
8:00 a.m. - 4:30 p.m. EST

BILL DATE

Monday - Friday

A Touchstone Energy Cooperative	www.owenelectric.com
ACCOUNT NUMBER . ACCOUNT NAME	SERVICE ADDRESS METER NUMBER

	NIXUTIL :	SANITATIO	N ASSOC IN	C	11968	CATALINA DE	RIVE - SEWER	175414	08/29/17
SERVICE PEI	RIOD TO	NO. Days	MET PREVIOUS	ER RE	ADING ENT	32.4 533	TER BILL TIPLIER DEMA	ART IN MEDICAL PROPERTY AND ARTEST ARTEST AND ARTEST AND ARTEST AND ARTEST AND ARTEST AND ARTEST ARTEST AND ARTEST ARTEST AND ARTEST ARTES	CHARGES
07/26/17 -0.004530 ENVIRONN LOCAL SC	08/25/17 PER KWHIENTAL SUFHOOL TAX-LES TAX-6% NT BILL DUILDUNT DUE DOR YOUR PA	3% 6 E 09/16/17	11.460%	354	63	R all de 32	1 16 <sup>5</sup> 1.7 <sup>3</sup>	2926 2926	277.63 -13.25 30.30 8.84 18.21 321.73 291.72 -291.72 321.73
NEXT METER READING D	ATE 09/26/	/17 SERVI	CE LOCATION		7141	1137112	TELEPHONE	(859) 363-5263	, , , , ,
NEAT METER READING L			Takib tounder	3:4-50	CLE		TOTAL AGOO	MINIT DAL ANOT	6204 72
COMPARISONS	DAYS SERVICE		AVG. KWH/DAY	AD IT TAKES A	12-24-1-12-12-2		IUIAL ACCC	DUNT BALANCE	\$321.73
Seems to 2 and the section of the se	DAYS SERVICE 30 29	2926 2621	98 90	6	19 CLASS		- A. Albania		\$321.73 INT AFTER DUE DATE



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Monday - Friday

	and the second s			
ACCOUNT NUMBER	ACCOUNT NAME	SERVICE ADDRESS	METER NUMBER	BILL DATE
	NIXUTIL SANITATION ASSOC INC	11968 CATALINA DRIVE - SEWER	175414	04/28/17
SERVICE PER	NO METER I	READING METER PULLER	KII OWATT	

	NIXUTILS	SANITATIO	ON ASSOC INC	1196	8 CATALI	VA DRIVE - SE	WER 1/5414	04/28/17
SERVICE PEF	RIOD TO	NO. Days	METI PREVIOUS	ER READING PRESENT	CODE	METER MULTIPLIER	BILLED KILOWATT DEMAND HOURS	CHARGES
03/27/17	04/26/17	30	22397	24920	R	1	2523	242.84
-0.004500	PER KWH	FUEL AD	JUSTMENT				2523	-11.35
ENVIRONM	MENTAL SUR	CHARGE	6.790%					15.72
LOCAL SCI	HOOL TAX-	3%						7.42
STATE SAL	ES TAX- 6%	b						15.28
TOTAL CURRE	NT BILL DUE	05/18/17						269.91
PREVIOUS AM	OUNT DUE							208.24
THANK YOU FO	OR YOUR PA	YMENT (S	3)					-208.24
<b>TOTAL AMOUN</b>	IT DUE							269.91
								}

CURRENT BILLING PERIOD 30 2523 84 619 PREVIOUS BILLING PERIOD 32 1938 61 RAYE CLASS CURRENT BILL DUE 05/18/17 BILL IS DELINQUENT AFTER DUE DA	NEXT METER READING DA	ATE 05/25/	17 SERVI	ÇE LOCATION		7141	1137048 TELEPH	IOÑE (859	) 363-5263	A
CURRENT BILLING PERIOD 30 2523 84 619 PREVIOUS BILLING PERIOD 32 1938 61 RAYE CLASS CURRENT BILL DUE 05/18/17 BILL IS DELINQUENT AFTER DUE DA	COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG. KWHIDAY	CY	CLE .	TOTAL	ACCOUN'	BALANCE	\$269.91
PERCYDOS BICLING PENOUD 32 1930 01 RATE CLASS	CURRENT BILLING PERIOD"	30	2523	84	6	19				NT ACTED DUE DATE
	PREVIOUS BILLING PERIOD	32	1938	61	RATE	CLASS	TO DESCRIPTION OF THE PARTY OF THE PARTY OF THE	1750	the state of the s	THE WEIGHT
SAME PERIOD LAST YEAR 32 2298 72 3 52 AFTER DUE DATE PAY \$282.2	SAME PERIOD LAST YEAR	32	2298	72	3	52	Al Al	FTER DUE	DATE PAY	\$282.27



SUMMER IS ALMOST HERE. Time to ensure your air conditioning system is ready: clean or replace filters, clean coils & clear debris from base of outside units.

## IMPORTANT INFORMATION

Due date is for CURRENT month's bill only. Any account with a previous amount due is subject to disconnection.

Please allow ample time for delivery before the due date when mailing your payment. Write account number on your check.

Return the bottom portion of this bill with your payment.

To Report a Power Outage, Call 1-800-372-7612

KEEP THIS STATEMENT FOR YOUR RECORDS

Visit us at: www.owenelectric.com

To view/pay your bill and see our other services.

ASK ABOUT THESE SERVICES & PRODUCTS
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E-Billing (Eliminates Paper Bills)
Levelized Budget Billing
EnviroWatts Green Power
HomeGard Surge Protection
Home Energy Analysis
Energy Efficiency Programs



Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

	. 10	A.
A Touchstone Energy	Cooperative	No. of

ACCOUNT NUMBER		ACCOUNT NA	ME	1 1 2 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	SERVIC	E ADDRESS	A.	METER NUMBER	BILL DATE
	NIXUTIL S	ANITATIO	ASSOC INC	1196	8 CATALIN	IA DRIVE - S	EWER	175414	03/29/17
SERVICE PER	OD TO	NO. Days	METI PREVIOUS	ER READING PRESENT	CODE	METER MULTIPLIER	BILLED	KILOWATT HOURS	CHARGES
-0.001690 ENVIRONM LOCAL SCH	ENTAL SUR HOOL TAX- 3 ES TAX- 6% HT BILL DUE DUNT DUE HR YOUR PA	3%	0.890%	22397 Chap	134 208	) )		1938	192.33 -3.28 1.68 5.72 11.79 208.24 235.36 -235.36 208.24
EXT METER READING D	person.	Balle To The William Street Annual Street	ELOCATION		11137048	TELEPI	Mark transferred	59) 363-5263	
COMPARISONS	DAYS SERVICE	her indestination and it have	AVG: KWH/DAY	CYCLE	86 -	TOTAL	ACCOUN	IT BALANCE	\$208.24
URRENT BILLING PERIOD	32	1938	61 74	619	CURREN	T BILL DUE	4/16/17 E	HLL IS DELINQUEN	NT AFTER DUE DAT
REVIOUS BILLING PERIOD.	29 30	2132	77	3 52	RIE TELEVISION	Commence of the control of the contr	700	E DATE PAY	\$217.77
and the grant decision in the state of the s	y Use Over The La				RE CONS			APPLIANCES IN	<del>-,</del>

JASOND J FM

IF YOU ARE CONSIDERING REPLACING APPLIANCES IN YOUR HOME - LOOK FOR ENERGY-EFFICIENT MODLES, SUCH AS ENERGY-STAR! CHECK FOR POSSIBLE REBATES AT owenelectric.com. THANK YOU.

## IMPORTANT INFORMATION

Due date is for CURRENT month's bill only.
Any account with a previous amount due is subject to disconnection.
Please allow ample time for delivery before the due date when mailing your payment.
Write account number on your check.
Petimethy before account of this bill with a count of the bill with account of the bill with a count of the bill wi

Visit us at: www.owenelectric.com
To view/pay your bill and see our other services.

ASK ABOUT THESE SERVICES & PRODUCTS
Automatic Bank / Credit Card Bill Payment

E-Billing (Eliminates Paper Bills)



Service Address 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#:

Prior Balance \$33.78

**Payments** \$-33.78

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** \$35.75

**Total Amount Due** \$35.75

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address:

PO Box 18640

Erlanger, KY 41018-0640

Any Questions?

Please call us at 859.578.9898 Monday - Friday 8:00 AM - 5:00 PM

\*\*How to pay your bill: OVER THE PHONE via our 24/7 automated system. ONLINE--NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

\*\*Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

**Billing Date** 10/27/2017

Payment Due ON or BEFORE Payment Due after Due Date

11/29/2017

\$39.03

**Meter Reading Data** 

Meter #	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20033496		2017-10-06	2017-10-17	11	Regular	0	0	0	HCF
20072621		2017-07-13	2017-10-06	85	Regular	. 8	8	0	HCF
						Total Usag	e Billed:	0	HCF

Service Period:	10/06/2017 - 10/06/2017	
	4	\$33.78
a: 1	VIII.	\$-33.78
O pe	7335 14	
O "	-, -, '	\$29.04
1,	270	\$3.76
	حوي ح	\$1.97
unty	V	\$0.98
CATALINA DR	34	\$35.75
	Service Period:	Good 3 1 1 + 3 c/2 1 +

**Usage History** 

Read Date	Days	Usage	
2017-10-17	96	0 HCF	
2017-07-13	91	0 HCF	
2017-04-13	90	0 HCF	
2017-01-13	91	1 HCF	
2016-10-14	92	0 HCF	
2016-07-14	91	0 HCF	

Amount Due ON or BEFORE 11/29/2017...... \$35.75

Due date is for CURRENT bill only. Any account with a previous amount due is subject to disconnection.



Service Address 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#

Payment Due ON or BEFORE Payment Due after Due Date

Prior Balance \$31.52

Payments \$-31.52 Bal.Forward Adjustments \$0.00 \$0.00

03/03/2017

New Charges \$36.04 Total Amount Due \$36.04

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address:

PO Box 18640

Erlanger, KY 41018-0640

Meter Reading Data

**Billing Date** 

01/27/2017

Current Read Date Days 2017-01-13 91

Read Type Regular Previous Current Reading Reading

Total Usage Billed:

Usage Units
1 HCF
1 HCF

Any Questions?

Please call us at 859.578.9898 Monday - Friday 8:00 AM - 5:00 PM

\*\*Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

\*\*How to pay your bill: OVER THE PHONE via our 24/7 CP automated system. ONLINE-NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

Current Charges Detail

**Previous Balance** 

Service Period:

10/14/2016 - 01/13/2017

\$31.52

Payment - Thank You

Current Charges Detail:

.....

\$30.60

\$-31.52

Fixed Service Charge Consumption - Tier 1:

Consumption - Tier 1: 1.00 HCF @ \$4.39 per HCF School Taxes - Kenton County

\$4.39 \$1.05

\$36.04

Current Charges for 11961 CATALINA DR

**Usage History** 

Read Date	_Days	Usage
2017-01-13	91	1 HCF
2016-10-14	92	0 HCF
2016-07-14	91	0 HCF
2016-04-14	91	5 HCF
2016-01-14	92	0 HCF
2015-10-14	92	0 HCF

Amount Due ON or BEFORE 03/03/2017..... \$36.04

Due date is for CURRENT bill only.

Any account with a previous amount due is subject to disconnection.



TADEDENIO NOTE

INDÉPENDENCE 5106 MADISON PIKE INDEPENDENCE

KY 41051-9998 2039600651

10/24/2016 (800)275-8777 9:29 AM

Product e Final Description u., Price

PM 2-Day 1 \$14.10 (Domestic) (SUN CITY, AZ 85351) (Weight:2 Lb 1.40 Oz)

(Weight:2 Lb 1.40 Oz) (Expected Delivery Day) (Wednesday 10/26/2016) (USPS Tracking #)

(USPS Tracking #) (9505 5158 6311 6298 0426 60) Insurance 1 \$0.00 (Up to \$50.00 included) US Flag Coil/1 1 \$47.00

(Unit Prise:\$47.00)

Total

\$61.10

Credit Card Remitd \$61.10 (Card Name:AMEX)

(Account #:XXXXXXXXXXXXX2001) (Approval #:542005) (Transaction #:161)

Includes up to \$50 insurance

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit USPS.com USPS Tracking or call 1-800-222-1811.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to https://www.usps.com/help/claims.htm.

Speled to PSC for Juntel 2/28/17 6,95

> CPU ACE HARDWARE FLORENCE 8515 US HIGHWAY 42 FLORENCE KY 41042-9678 202836-5636

(300)275-8777 03/28/2017 1:15 PM

------------------

Product Sale Final Description Oty Price

PM 2-Day 1 \$6.95
Legal FR Env (Domestic) (FRANKFORT, KY 40602) (Flat Rate) (Expected Delivery Day) (Thursday 03/30/2017)

(USPS Tracking #) (9505 5165 2356 7087 0212 43) Insurance 1 \$0.00 (Up, to \$50.00 included)

Total \$6.9

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit USPS.com USPS Tracking or call 1-800-222-1811.

Bill #: 840-24500491-1-130369-2 Login ID: CHERYLD

INDEPENDENCE 106 MADISON PIKE INDEPENDENCE KY

41051-9998 2039600651

12/06/2017 (800) 275-8777 3:46 PM

Product Description

Sale Qty

Final Price

Nativity Bklt (Unit Price:\$9.80) \$49.00

Total

\$49.00

Credit Card Remitd (Card Name:VISA)

\$49.00

(Account #:XXXXXXXXXXXXXX9455) (Approval #:63438A)

(Transaction #:093)

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print shipping labels with postage. For other information call 1-800-ASK-USPS.

\*\*\*\*\*\*\*\*\*\*\* Get your mail when and where you want it with a secure Post Office Box. Sign up for a box online at usps.com/poboxes. \*\*\*\*\*\*\*\*\*\*\*\*

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Go to: https://postalexperience.com/Pos

840-5450-0032-002-00009-78930-01

or scan this code with your mobile device:



or call 1-800-410-7420.

YOUR OPINION COUNTS

Bill #: 840-54500032-2-978930-1

flerk:

INDEPENDENCE 5106 MADISON PIKE INDEPENDENCE KY

41051-9998 2039600651

04/21/2017

(800) 275-8777

10:21 AM 

Product Description

Sale Qty

Final Price

First-Class

Mail

Large Envelope (Domestic)

(FRANKFORT, KY 40601) (Weight: 0 Lb 4.80 0z) (Expected Delivery Day) (Monday 04/24/2017)

Total

\$1.82

Cash Change

\$20.00 (\$18:48)

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print shipping labels with postage. For other information call 1-800-ASK-USPS.

\*\*\*\*\*\*\*\*\*\*\*\*\*\* Get your mail when and where you want it with a secure Post Office Box. Sign up for a box online at usps.com/poboxes. \*\*\*\*\*\*\*\*\*\*\*\*

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840-5450-0032-001-00009-38505-02

or scan this code with your mobile device:





or call 1-800-410-7420.

YOUR OPINION COUNTS

Bill #: 840-54500032-1-938505-2 Clerk: 04

INDEPENDENCE 5106 MADISON PIKE

INDEPENDENCE KY

41051-9998 2039600651

10/10/2017 \*

(800) 275-8777

Product Description

Sale Qty

Final Price

US FlagM

\$49.00

(Mit Price:\$49.00).

Total

\$49.00

Personal/Bus Check

\$49,00

Order stamps at usps.com/shop or call 1-800-Stamp24. Go to usps.com/clicknship to print shipping labels with postage. For other information call 1-800-ASK-USPS.

\*\*\*\*\*\*\*\*\*\*\*\* Get your mail when and where you want it with a secure Post Office Box. Sign up for a box online at usps.com/poboxes. \*\*\*\*\*\*\*\*\*\*\*

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TELL US ABOUT YOUR RECENT POSTAL EXPERIENCE

Go to: https://postalexperiènce.com/Pos

840-5450-0032-002-00008-83507-01

or scan this code with your mobile device:



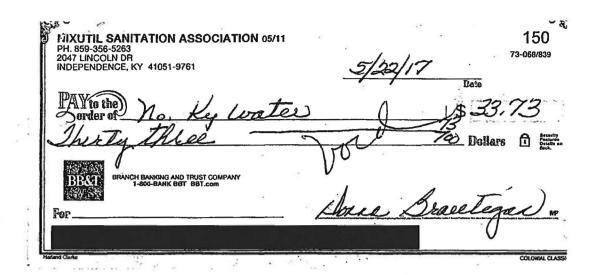
or call 1-800-410-7420.

YOUR OPINION COUNTS

Bill #: 840-54500032-2-883507-1

Clerk:

06



# portion with your payment. Make check or money order payable to NKWD.

Northern & Kentucky district

PO Box 188190 Erlanger, KY 41018-8190

Address Service Requested

**Customer Number** 

**Account Number** 

Service Address 11961 CATALINA DR

ON or BEFORE 05/30/2017

Pay this Amount \$33.73

**AFTER** 05/30/2017 Pay this Amount

\$37.01

If address has changed, please check here complete the information on the reverse side and mail back to NKWD

րիիվելերիով||Իվ||կոս|կերկերիա||ելիա||նիրի HAROLD BRAUTIGAN

Northern Kentucky Water District PO Box 188190

Erlanger, KY 41018-8190

եվիվլ[Ալլեմ|Հլլ|լիլ|գ]մի/ենսեւվակա]լմը[եվրվին



2835 Cresent Springs Rd

Erlanger, KY 41018-1324

Erlanger, KY 41018-0640

Please call us at 859.578.9898

\*\*2017 The Northern Kentucky Water District annual water

quality report for the calendar year 2016 is available. This report contains important information about your drinking

Please go to www.nkywater.org/ccr.pdf to view your 2016

annual water quality report or to request a paper copy call

\*\*How to pay your bill: OVER THE PHONE via our 24/7 automated system. ONLINE-NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY

Mailing Address: PO Box 18640

Any Questions?

Monday - Friday 8:00 AM - 5:00 PM

water.

(859) 441-0482.

YOUR BILL option.

Office:

Service Address 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#:

Prior Balance \$36.04 Payments \$-36.04 Bal.Forward Adjustre \$0.00 \$0.00

Adjustments New Charges \$0.00 \$33.73 Total Amount Due \$33.73

04/26/2017

Payment Due ON or BEFORE Payment Due after Due Date

05/30/2017

\$37.01

Meter Reading Data

Meter #	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20033496		2017-01-13	2017-04-13	90	Regular	. 8	8	0	HCF
20033496						Total Usag	e Billed:	0	HCF

Current Charges Detail

Service Period:

13/2017(1-)04/13/2017

Previous Balance

(ř

Payment - Thank You

Current Charges Detail:

Fixed Service Charge Fixed Service Charge

School Taxes - Kenton County
Current Charges for 11961 CATALINA DR

\$-36.04

\$36.04

\$0.68 \$32.07

\$0.98 \$33.73

Usage History

Read Date	Days	Usage
2017-04-13	90	0 HCF
2017-01-13	91	1 HCF
2016-10-14	92	0 HCF
2016-07-14	91	0 HCF
2016-04-14	91	5 HCF
2016-01-14	92	0 HCF

Amount Due ON or BEFORE 05/30/2017...... \$33.73

Due date is for CURRENT bill only.

Any account with a previous amount due is subject to disconnection.

#### Service Address 11961 CATALINA DR

## **Account Summary**

Prior Balance 36.04

**Payments** \$-36.04

Bal. Forward \$ 0.00

**Adjustments** \$ 0.00

Customer Number

**New Charges** \$ 33.73

**Total Amount Due** \$33.73

**Billing Date** 

April 26, 2017

20033496 5/8"

**Next Reading Date:** 

**Payment Due BEFORE** May 30, 2017

**Payment Due AFTER Due Date** 

\$37.01

Account Number

Office:

2835 Crescent Springs Rd Erlanger, KY 41018

Mailing Address:

P.O. Box 18640 Erlanger, KY 41018-0640

Any questions?

Please call us at (859) 578-9898 Monday to Friday 8:00 AM to 5:00 PM

Make checks to: NKWD

\*\*2017 The Northern Kentucky Water District annual water quality report for the calendar year 2016 is available. This report contains important information about your drinking water.

Please go to www.nkywater.org/ccr.pdf to view your 2016 annual water quality report or to request a paper copy call (859) 441-0482.

\*\*How to pay your bill: OVER THE PHONE via our 24/7 automated system. ONLINE--NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

Meter Reading Data

Meter Previous Current Meter# Size Read Date Read Date

01/13/17 04/13/17

Read Days Type

Regular

90

Previous Reading

Current Usage Units Reading HCF

8 Total Usage Billed:

0 HCF

\$0.00

32.07

0.68

0.98

\$33.73

July 2017

Current Charges Detail Service period: January 13, 2017

to April 13, 2017

Balance Forward.....

**Current Charges Detail** 

Fixed Service Charge.... Fixed Service Charge.....

School Taxes - Kenton County..... **Current Charges for 11961 CATALINA DR** 

Amount Due ON or BEFORE May 30, 2017

\$33.73 ......

Usage History

Bill date	Days	Usage	
1/13/2017	91	1.00	HCF
10/14/2016	92	0.00	<b>HCF</b>
7/14/2016	91	0.00	HCF
4/14/2016	91	5.00	HCF
1/14/2016	92	0.00	HCF



Service Address 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#

Prior Balance \$33.73

**Payments** \$-33.73

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** \$33.78

**Total Amount Due** 

**Billing Date** 

Payment Due ON or BEFORE Payment Due after Due Date

\$33.78

07/26/2017

08/28/2017

**Meter Reading Data** 

**Previous** Meter **Read Date** Meter # Size 20033496 2017-04-13

Current Read Date Days 2017-07-13

Read Type Regular

Current Previous Reading

Reading Usage Units 0 HCF Total Usage Billed: 0 HCF

Any Questions?

PO Box 18640

Mailing Address:

2835 Cresent Springs Rd

Erlanger, KY 41018-1324

Erlanger, KY 41018-0640

Office:

Please call us at 859.578.9898 Monday - Friday 8:00 AM - 5:00 PM

"How to pay your bill: OVER THE PHONE via our 24/7 automated system. ONLINE-NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

"Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

**Current Charges Detail** 

Service Period:

04/13/2017 - 07/13/2017

Previous Balance

\$33.73

Payment - Thank You Current Charges Detail:

Fixed Service Charge

School Taxes - Kenton County

Current Charges for 11961 CATALINA DR

\$-33.73

\$32.80 \$0.98 \$33.78

**Usage History** 

Read Date	Days	Usage
2017-07-13	91	0 HCF
2017-04-13	90	0 HCF
2017-01-13	91	1 HCF
2016-10-14	92	0 HCF
2016-07-14	91	0 HCF
2016-04-14	91	5 HCF

Amount Due ON or BEFORE 08/28/2017.....

Due date is for CURRENT bill only. Any account with a previous amount due is subject to disconnection.

Carl W. Cro 4576 River Hebron Ky.	Rd.	Phone Numbers Home 586-6005 Cell 250-8338	
Name	Nixutil Sanitation Assocaition WWTP		Amount
Date	Services		
Oct Dec.	Quarterly service charge for operation at the Treatment Plant		\$930.00
	Flow measurement & Field Lab Fees		\$100.00
	Sludge Hauled		\$750.00
	Chlorine Tablets		\$600.00
	De-clor Tablets 30 lbs.		\$300.00
	Service Blower & Belts		\$100.00
	Sampler rental & sampling		\$35.00
11/12/2016	Replaced Starter & overloads	Parts Labor	\$182.00 \$70.00
11/25/2016	Removed old rusted sludge return valves & pipe Removed old blowers, motors & trash from grounds	Labor	\$140.00
12/3/2016	Installed 2 new valves & sludge return pipe	Parts Labor	\$238.67 \$210.00

Crone Environmental Services

start Jaying \$ 1000 medale January

Total

\$3,655.67

Invoice No.

Crone Environmental Services Carl W. Crone 4576 River Rd. Hebron Ky. 41048 Invoice No. Phone Numbers Home 586-6005 Cell 250-8338

Name	Nixutil Sanitation Assocaition WWTP		Amount	
Date	Services			
Jan-March Quarterly service charge for operation at the Treatment Plant				
	Flow measurement & Fi	eld Lab Fees	\$225.00	
	Sludge Hauled		\$750.00	
	Chlorine Tablets		\$650.00	
	De-clor Tablets 3	0 lbs.	\$300.00	
	Service Blower & Belts		\$150.00	
	Sampler rental & sampli	ng	\$35.00	

Total \$3,040.00

Barbara markoto

Part 10 10 1000

Crone Environmental Services Carl W. Crone 4576 River Rd. Hebron Ky. 41048 Invoice No. Phone Numbers Home 586-6005 Cell 250-8338

Name

**Nixutil Sanitation Assocaition WWTP** 

**Amount** 

Date

Services

6/30/2017 Pulled old motor & Installed new 5 HP Motor

Parts & Labor

\$822.50

Total \$822.50

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 Invoice No.
Phone Numbers
Home 916-5198
Cell 250-8338

	Name	Nixutil Sanitation Assocaition W	WTP	Amount
	Date	Services		
(	JulSept	\$930.00		
		Flow measurement & Field Lab	Fees	\$225.00
	150	Sludge Hauled	X-tra load July	\$750.00
		Chlorine Tablets		\$550.00
		De-clor Tablets 45 lbs.		\$300.00
		Service Blower & Belts		\$150.00
		Sampler rental & sampling		\$35.00

2000

Total

\$2,940.00

Crone Environmental Services Carl W. Crone 4576 River Rd. Hebron Ky. 41048

Sludge Hauled

**Chlorine Tablets** 

**De-clor Tablets** 

Service Blower & Belts

Sampler rental & sampling

Invoice No.
Phone Numbers
Home 586-6005
Cell 250-8338
Amount

Name	Nixutil Sanitation Assocaition WWTP	C/252					
Date	Services	ı					
Apr-June	Apr-June Quarterly service charge for operation at the Treatment Plant						
	Flow measurement & Field Lab Fees						

40 lbs.

\$225.00 \$750.00 \$650.00 \$400.00 \$150.00 \$35.00

Installed new Chlorine pump \$365.00

Cut & sprayed weeds \$45.00

Total \$3,550.00

\$930.00



**Empty Cart** 

Products Search

ALL Products

Stenner Pumps

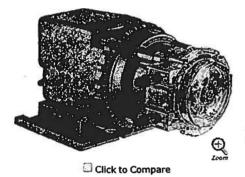
Stenner Pumps 45 Series

45M\_

45M5 - Stenner Pumps Chemical Feeder

prev ) listing ) next

## 45M5 - Stenner Pumps Chemical Feeder



\$545.07 \$295.00

Model: 45M5

Condition: New in Box Shipping Weight: 9lbs

Manufactured by: Stenner Product Availability: In Stock

Stenner 45M5 Specifications: 🖫

Options:

Choose Here.. Stenner Voltage

Stenner Tube

1/4 White (Standard) = 1 ▼

Type Add a Rain Roof

(no thanks)

Quantity:

Add to Cart

45M5

Accessories

Parts

#### 2.5 to 50 gpd - 25 psi - Adjustable - Single Head - #5 Tube

45M5, Stenner Peristaltic Pump, Stenner Chemical Feed Pump, Stenner Metering Pump

Stenner Pumps 45M5 adjustable chemical feeder is built with three detachable components: the motor, feed rate control, and pump head. Outputs are dependent upon three factors: the rpm of the motor gears, the percentage setting on the feed rate control, and the size of the peristaltic pump tube. All of Stenner Pumps chemical feed pumps have a 3-point roller design in the pump head, which acts as a check valve to prevent back flow, siphoning, overdosing and loss of prime

The motor shaft rotates at a fixed rpm which drives the adjustable feed rate control to intermittently engage the roller assembly within the pump head. The chemical solution in the pump tube is captured between the rollers as they rotate and compress the tube. As the rollers advance, the squeezed tube section regains its original form and generates a vacuum, creating the self-priming feature that delivers a constant flow unaffected by the outlet pressure.

#### **PARTS INCLUDED**

- 3 Connecting Nuts
- 3 Ferrules
- · 1 Injection Fitting
- · 1 Weighted Suction Line Strainer
- 1 20 Feet Suction and Discharge Tubing
- 1 Additional #5 Pump Tube
- 2 Additional Latches for Cover
- 1 Mounting Bracket
- 1 Manual

# Sales & Service **SINCE 1952**

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Simply show us where you saw the lower price and we will match it if we can.

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Skype Us

#### What our customers say...

"Just want to thank you for excellent response and delivery of pump I ordered ... will certainly recommend you to anyone looking for your products... thanks"

"Thank you so much for your help on the phone and for the fastest shipping response I have ever had, period. Thanks again I look forward to working on installing the new pump and motor when they get here. "

"Service was great, pump was exact replacement, and received it within a week. Would recommend you highly. Thank you. "

[+] Read More

605 people like this. Sign Up to see what your friends like.



**GRAINGER Inc.** 6655 Crescent Dr Norcross, GA 30071

**Customer Information** 

SANITATION DIST 1 1045 EATON DR

**FORT WRIGHT KY 41017-9655** 

Billing Information

**SANITATION DIST 1** 1045 EATON DR

**FORT WRIGHT KY 41017-9655** 

**Shipping Information** 

**SANITATION DIST 1** 

1045 EATON DR

**FORT WRIGHT KY 41017-9655** 

Information

Grainger Quote Number

Validity Start Date

Validity End Date

Creation Date

Grainger EIN Number

PO#

06/30/2017 36-1150280

801899782

**CHRIS CRONE** 

2032966611

06/30/2017

07/30/2017

PO Create Date

PO Release #

Customer Number

Department Number Project/Job Number

Requisitioner Name

Attention

Caller

Telephone Number

Page

**CHRIS CRONE** 8595787450

1 /2

Freight Forwarder

We will deliver according to the following terms and conditions:

Incoterms® 2010:

Freight Terms:

**FOB ORIGIN** Prepaid

Carrier:

\* See line item detail

**Payment Terms:** 

Net 30 days after invoice date

Special instructions: feb blanket po 06-00293 or 07-01433

item O-Lin	The same took of the same took	rial Description Expect Del Da		Unit	Price	Total in USD
10	6K854	GP Mtr,CS-CR,ODP,5 HP,1740 rpm,184T Mfg Brand Name: DAYTON Manufacturer Part No: 6K854 Carrier:	1.00	EA	639.75	639.75
	5	*		Sub 1	<b>Total</b>	639.75
				Total	USD	\$ 639.75



PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

Remit To:

PACE Analytical Services, Inc.

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242 INVOICE

Print DATE:

07/26/17

Invoice No: 1707257

Invoice To:

Nixutil Sanitation 2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn:

Rick Mains

Phone:

859-356-5263

Work Order: PO Number: 17G1065

Project ID:

Quarterly KPDES

Date Received

07/19/17

Lab Sample ID	Client Sample ID	Test Name		Quoted Price
17G1065-01	Nixutil Sanitation - Comp.			14
		TSS [6 day]		\$15.50
		NKY_SampHand [6 day]		\$25.00
		NH3 [6 day]		\$26.50
		CBOD [6 day]		\$26.50
			Sample Total:	\$93.50
17G1065-02	Nixutil Sanitation - Grab			
		NKY_REPORT [6 day]		\$0.00
		NKY_BACT_ECOLI_W_18 [6 d		\$42.00
			Sample Total:	\$42.00
			INVOICE Total:	\$135.50

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS. PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE ADVICE.

Page 1 of 1

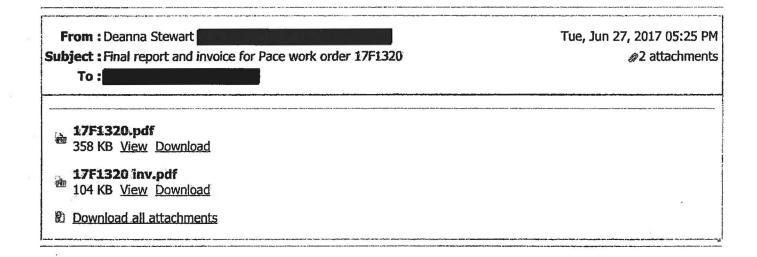
Have a great weekend!

Deanna Stewart Project Coordinator

Pace Analytical Services, Inc. 25 Holiday Drive | Englewood, Ohio 45322 Tel 937.832.8242 | Fax 937.832.2868 |

The NKY Service Center is moving effective January 1, 2017! 931 Dudley Road Edgewood, KY 41017

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PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

11/06/17

Invoice No: 1711501

12/20/2017

Remit To:

PACE Analytical Services, Inc.

PO Box 684056 Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

**Nixutil Sanitation** 

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn: Phone: Rick Mains 859-356-5263

Work Order:

17J1816

Order Name:

Quarterly KPDES

INV DATE:

PO Number:

Date Received

10/30/17

Matrix	Quantity	Unit Price	Quoted	Extended Cost
Water	1	\$30.00	\$15.50	\$15.50
Water	1	\$0.00	\$25.00	\$25.00
Water	1	\$95.00	\$42.00	\$42.00
Water	1	\$30.00	\$26.50	\$26.50
Water	1	\$80.00	\$26.50	\$26.50
	Water Water Water Water	Water ! Water ! Water ! Water ! Water !	Water       1       \$30.00         Water       1       \$0.00         Water       1       \$95.00         Water       1       \$30.00	Water     1     \$30.00     \$15.50       Water     1     \$0.00     \$25.00       Water     1     \$95.00     \$42.00       Water     1     \$30.00     \$26.50

INVOICE Total:

\$135.50

All invoices are due and payable net 30 days from receipt.



PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

06/27/17

06/27/17

Invoice No. 1706166

Remit To:

PACE Analytical Services, Inc.

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

Nixutil Sanitation

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn: Phone: Donna Brautigan (859) 356-2326

Work Order:

17F1320

PO Number:

Y'minin

8/3/17 CR 166 135.50

Project ID:

Quarterly KPDES

INV DATE:

Print DATE

Date Received

06/21/17

Lab Sample ID	Client Sample ID	Test Name		Quoted Price
17F1320-01	Nixutil Sanitation - Grab			
	•	OG_1664 [6 day]		\$60.00
		NKY_REPORT [6 day]		\$50.00
			Sample Total:	\$110.00
<del></del> .			INVOICE Total:	\$110.00

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS. PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE ADVICE.

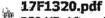
Thank you for using Pace Analytical!

Deanna Stewart Project Coordinator

Pace Analytical Services, Inc. 25 Holiday Drive | Englewood, Ohio 45322 Tel 937.832.8242 | Fax 937.832.2868 |

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358 KB View Download

17F1320 inv.pdf 104 KB View Download

Download all attachments

Thank you for using Pace Analytical!

Deanna Stewart Project Coordinator

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From : Deanna Stewart

Fri, Jul 21, 2017 10:54 AM

@1 attachment

Subject: Fwd: Final report and invoice for Pace work order 17F1320

To:

Cc: Vamessa Heslep

Good morning Donna,

Here is a copy of the email I sent to you containing your report and invoice.

Once you open the email, you must wint the report and invoice or the email will go to your old email file and you may not be able to see it.

If you every think you are missing something or have any questions, please give me a call and I will gladly help you out.

#### Cincinnati Bell Webmail

Fwd: Final report and invoice for Pace work order 17F1320

Subject: Fwd: Final report and invoice for Pace work order 17F1320

From:

Fri, Jul 21, 2017 11:09 AM

@1 attachment

To: Gwen Brautigan

From: "Deanna Stewart"

To: dbrautigan@zoomtown.com

Cc: "Vanessa Heslep"

Sent: Friday, July 21, 2017 10:54:29 AM

Subject: Fwd: Final report and invoice for Pace work order 17F1320

Good morning Donna,

· Here is a copy of the email I sent to you containing your report and invoice.

Once you open the email, you must print the report and invoice or the email will go to your old email file and you may not be able to see it.

If you every think you are missing something or have any questions, please give me a call and I will gladly help you out.

Have a great weekend!

Deanna Stewart Project Coordinator

#### Pace Analytical Services, Inc.

25 Holiday Drive | Englewood, Ohio 45322 Tel 937.832.8242 | Fax 937.832.2868 |

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From: Deanna Stewart < Deanna. Stewart@pacelabs.com >

Subject: Final report and invoice for Pace work order 17F1320

To:dbrautigan@zoomtown.com

Tue, Jun 27, 2017 05:25 PM

@2 attachments

3

EXPLANATION OF NOTICE, CONTINUED TAXPAYER ID: 000048000 NOTICE NUMBER: 108772354

#### NOTICE OF INTENT TO OFFSET

IF ANY PORTION OF YOUR LIABILITY REMAINS UNPAID AFTER 60 DAYS FROM THE DATE OF THIS NOTICE, THE DEPARTMENT MAY SUBMIT YOUR DEBT TO THE TREASURY OFFSET PROGRAM (TOP). DNCE YOUR DEBT IS SUBMITTED TO TOP FOR OFFSET, THE UNITED STATES DEPARTMENT OF TREASURY MAY REDUCE OR WITHHOLD ANY OF YOUR ELIGIBLE FEDERAL TAX REFUNDS OR VENDOR PAYMENTS BY THE AMOUNT OF YOUR DEBT. THESE OFFSET PROCESSES ARE AUTHORIZED BY 31 U.S.C. 3716, 26 U.S.C. 6402, KRS 44.065 AND KRS 44.030.

## NOTICE FOR LICENSE AND MOTOR VEHICLE REGISTRATION REVOCATION

KENTUCKY STATUTES ENABLE THE DEPARTMENT OF REVENUE TO REQUEST THE REVOCATION OR SUSPENSION OF ANY PROFESSIONAL LICENSE, LICENSE TO PRACTICE LAW, OR DRIVER'S LICENSE ISSUED BY ANY LICENSING AGENCY OF THE COMMONWEALTH OR THE KENTUCKY SUPREME COURT TO ANY PERSON THAT IS DETERMINED BY THE DEPARTMENT TO BE A "DELINQUENT TAXPAYER" AS DEFINED IN KRS 131.1817. ADDITIONALLY, THE DEPARTMENT MAY NOTIFY THE KENTUCKY TRANSPORTATION CABINET THAT AN OWNER OF A MOTOR VEHICLE IS A "DELINQUENT TAXPAYER," REQUIRING THE TRANSPORTATION CABINET TO PROHIBIT THE DELINQUENT TAXPAYER FROM REGISTERING OR RENEWING THE REGISTRATION OF THE MOTOR VEHICLE.



PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

05/09/17

05/09/17

Invoice Noc. 1704274

INV DATE

Print DATE

Remit To:

PACE Analytical Services, Inc.

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

Nixutil Sanitation

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Atm:

Harold Brautigan

Phone:

(859) 356-2326

Work Order: PO-Number: 17E0033

Project ID:

Quarterly KPDES KY0075833

Date Received

05/01/17

Lab Sample ID	Client Sample HD	Test Name	And section	Quoted Price
17E0033-01	Nixutil Sanitation - Comp.			
	757	TSS [7 day]		\$15.50
		NKY_SampHand [6 day]		\$25.00
		NH3 [7 day]		\$26.50
114			**********	\$26.50
		7	Sample Total:	\$93.50
17E0033-02	Nixutil Sanitation - Grab		*	
1,0		NKY_BACT_ECOLI_W_18 [7.d		\$42.00
-000 <b>8</b> 0		_	Sample Total:	\$42.00
	<del></del>			

INVOICE Total:

\$135.50

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS. PLEASE REFERENCE INVOICE NUMBER ON ALL REMFETANCE ADVICE.

JA5.50



PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

Invoice No: 1700375

Print DATE:

Remit To:

PACE Analytical Services, Inc.

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

Nixutil Sanitation

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn:

Harold Brautigan

Phone:

(859) 356-2326

Work Order:

17A0615

Order Name:

Quarterly KPDES KY0075833

PO Number:

Date Received

01/12/17

Item	Matrix	Quantity	Quoted	0	Extended Cost
TSS [7 day]	Water	1	\$15.50		\$15.50
NKY_BACT_ECOLI_W_18 [7 day]	Water	1	\$42.00		\$42.00
NH3 [7 day]	Water	1	\$26.50		\$26.50
CBOD [7 day]	Water	4	\$26_50		\$26.50
Additional Items					5
Sample Handling & Disposal Fee		1		\$25:00	\$25.00

INVOICE Total:

\$135.50

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS, PLEASE. REFERÊNCE INVOICE NÚMBER ON ALL RÉMITTANCE ADVICE.

Od 144/11 Pelso \$135

Page 1 of 1



Thursday, January 19, 2017 Analytical Results

Donna Brautigan
Nixutil Sanitation
2048 Lincoln Drive
Independence, KY 41051

TEL: (859) 356-2326

**FAX** 

RE: Quarterly KPDES KY0075833

Work Order: 17A0615

PACE Analytical received 2 sample(s) on 1/12/2017 for the analyses presented in the following report.

PACE Analytical attests that all analytical methods were performed using acceptable methods, and that the QA/QC procedures stipulated in these methods were followed. This report shall not be reproduced except in full. All samples are reported on a dry-weight basis unless otherwise stated.

If you have any questions regarding the test results, please feel free to call me at (937) 832-8242.

Respectfully submitted,

Deanna Stewart

Project Coordinator

25 Holiday Drive

Englewood, Ohio 45322

1.937.832.8242

1.937.832.2868 Fax

Certifications:

NELAP/NELAC - #04130

VAP - #CL0032

OEPA DW - #872

KDEP WW - #98039

104 North Street

Wilder, Kentucky 41071

1.859:341.9989

1.937.832.2868 Fax

Certifications:

KDEP WW- #00053

KDEP DW: #00053

**PACE Analytical** 

Date:

1/19/2017

CLIENT: Project: **Nixutil Sanitation** 

Quarterly KPDES KY0075833

Lab Order:

17A0615

# **Work Order Sample Summary**

\*\*The results of analyses performed on the following samples submitted to Pace Analytical Dayton are found in this report .\*\*

 Field Sample ID	Lab 1D	Matrix	Method Reference	Subcontract Lab	
Nixutil Sanitation - Comp.	1.7A0615-01	Water	EPA 350.1		
			EPA 405.1/SM.5210		
			SM 2540D		
Nixutil Sanitation - Grab	17A0615-02	Water	Colilert 18 SM 9223-B		

**PACE Analytical** 

Date:

1/19/2017

CLIENT:

Nixutil Sanitation

Project:

Quarterly KPDES KY0075833

Lab Order:

17A0615

Lab ID:

17A0615-01

Client Sample ID:

Nixutil Sanitation - Comp.

Collection Date: 1/12/2017 12:55:00PM

Matrix: Water

Analysis	Result	PQL	Qual	Units	Dilution	Batch	Date Analyzed
CBOD		A 405.1/SM 52	10			Analys	t: TWM
Carbonaceous Biological Oxygen Bemand	72:18	2.00		mg∕L	1	1702215	1/13/2017 5:20:00AM
NH3	EP	A 350.1				Analys	t: JJH
Ammonia	0:227	0:200		mg/L	ŀ	1703161	1/18/2017 2:29:00PM.
TSS	SM 2540D					Analys	:: TEF
Suspended Solids (Residue, Non-Filterable)	10.0	5.00		mg/L	100	1703073	1/18/2017 11:06:34AM

Lab ID:

17A0615-02

Client Sample ID:

Nixutil Sanitation - Grab

Collection Date: 1/12/2017 12:45:00PM Matrix: Water

Analysis	Result	PQL	·Qual	'Units	Dilution	Batch	Date Analyzed
NKY_BACT_ECOLI_W_18	Co	lilert 18 SM 92	223-B	1.51		Analys	t: NAG
E. coli	23.3	1.00		MPN/100 mL	1	1702192	1/12/2017 4:07:00PM

**PACE Analytical** 

Date:

1/19/2017

CLIENT: Project:

Nixutil Sanitation Quarterly KPDES KY0075833

Lab Order:

17A0615

Notes and Definitions

# Pace Analytical

#### CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

17AD615

Risquire	n A d Client Information	Section B Regulater P		formation:					4.9	tion C		h.												Page	o:	1	•	of /	
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Email To	: rickmains@fuse.net	Purchasa O	rder No.			-				Quote			2 10		-	-	-	***	100	r y	ST	£	R	CRA			Г.	OTHER	
Phone:	859-363-7961 Fac	Project Nam	ne: Q	bly KPDE	3		100			Project	D	EAN	VA S	TEV	VAR	Γ,		_		grá (	oc a	72.77 10.0					9		
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### Sample Condition Upon Receipts

Client Name: Nixuti/Rel-Aire Project # 7A0675

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client tracking #:	t ∐Commercial	L.) Pace	Other _		P. Printers
Custody Seal on Cooler/Box Present:	Tho Seals	intact:	yes 🗌	☐ no	
Packing Material: Bubble Wrap Bubble	Bags - Mone	Other			
Thermometer Used LONINIR	Type of ice: Wet	Blue	None =		nples on ice, cooling process has begun
Cooler Temperature	~				Date and Initials of person examining contents: DA 7 1-12-17
Temp should be above treezing to 6°C		Commen	rts:		
Chain of Custody Present:	Øres □No □N/A	1.			
Chain of Custody Filled Out:	TOYes DNo DNA	2.			
Chain of Custody Relinquished:	Wes ONO ONIA	3:			
Sampler Name & Signature on COC:	Øfes □No □N/A	4.			
Samples Arrived within Hold Time:	Offes One Onia	5.			
Short Hold Time Analysis (<72hr):	EVes UNO UNA	6. [ ]	00		E. coll
Rush Turn Around Time Requested:	Dyes 1916 DN/A	7.			
Sufficient Volume:	SNes ONO ONA	8.			
Correct Containers Used:	DYES DNO DNA	9.			
-Rase Containers Used:	Dies Omo On/A				
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Filtered volume received for Dissolved tests	OYes ONo DAIA	11.		4	
Sample Labels match COC:	CYCS DINO DINA	12.	7. (10) (2,00		
-Includes date/time/ID/Analysis Matrix:	WW				
Samples checked for dechlorination:	□Yes □No DOWN	14:			
Headspace in VOA Vials (>Amm):	□Yes □No □NA	15.			
Trip Blank Present:	□Yes □No QMA	16.		×	
Trip Blank Custody Seals Present	DYOS DNO DNA				. 4
Pace Trip Blank Lot# (if purchased);					

Pace Analytical Services, LLC 52-500148 NIXUTIL SANITATION

1125718597

Check Number:

Date: 05/12/2017

Invoice Number RFND0000005407 Date

05/11/2017

<u>ate</u> Youc

Youcher Number

VCH00000000669670

Description

RM REFUND: DEBIT000753

\$135.50

Discount \$0.00 Paid Amount

\$135.50

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Dep 11/17

1

TOTALS:

\$135.50

\$0.00

¢135.5

PAGE

TOTAL AMOUNT OF 50.00

BALANCE DUE

50.00

TOTAL DUE AS OF: 07/14/2017

PLEASE RETURN THE NOTICE OF TAX DUE STUB WITH PAYMENT TO: DEPARTMENT OF REVENUE, FRANKFORT, KENTUCKY 40619.

ONLINE PAYMENT OPTIONS ARE AVAILABLE. THE DEPARTMENT OF REVENUE ACCEPTS PAYMENTS BY CREDIT CARD OR ELECTRONIC CHECK. PAYMENT RULES VARY BY TAX TYPE. YOU MAY GET MORE DETAILS AND MAKE PAYMENTS AT HTTPS://EPAYMENT.KY.GOV/EPAY.

TO PAY BY PHONE, PLEASE CALL (502) 564-4921, EXT. 5357. CARDS ACCEPTED ARE VISA, MASTERCARD, DISCOVER OR AMEX. 2.75% CONVENIENCE FEE FOR CREDIT CARD PAYMENT OR \$1.00 CONVENIENCE FEE FOR DEBIT CARD PAYMENT. NO CHARGE FOR ELECTRONIC CHECKS.

IMPORTANT REMINDER: INCLUDE YOUR TAXPAYER IDENTIFICATION NUMBER, TYPE OF TAX, AND TAX PERIOD ON ANY PAYMENT OR LETTER SENT TO THE DEPARTMENT OF REVENUE. THIS ENABLES THE DEPARTMENT OF REVENUE TO CORRECTLY CREDIT YOUR ACCOUNT FOR THE TAX PERIOD AND TYPE TAX FOR WHICH YOU INTENDED.

REPLY TO: JUDY 0207

DEPARTMENT OF REVENUE STATION NUMBER 62 501 HIGH STREET P 0 BOX 181

FRANKFORT

KY 40602

TEL: (502) 564-9280 FAX: (502) 564-3393

OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

#### NOTICE REQUIREMENT FOR INTERNET POSTING

IF YOUR TAX LIABILITY REMAINS UNPAID FOR MORE THAN 90 DAYS AFTER THE DATE OF THIS ORIGINAL NOTICE, THE DEPARTMENT OF REVENUE MAY POST YOUR NAME AND THIS LIABILITY FOR PUBLIC INSPECTION, INCLUDING POSTINGS IN YOUR LOCAL NEWSPAPER AND/OR ON THE INTERNET. HOWEVER, IF YOU NOTIFY THE DEPARTMENT IN WRITING DURING THIS PERIOD OF ANY OF THE FOLLOWING, THE DEPARTMENT MUST EXCLUDE YOUR NAME FROM ANY PUBLIC POSTING:

- YOU HAVE AN APPEAL PENDING OR INTEND TO FILE AN APPEAL PURSUANT TO KRS 131.110 ET SEQ. WITH RESPECT TO THIS LIABILITY;
- 2. YOU ARE CURRENTLY PAYING THIS TAX LIABILITY THROUGH A VALID PAY AGREEMENT;
- 3. THE DEPARTMENT IS REVIEWING OR ADJUSTING THIS TAX LIABILITY;
- 4. YOU ARE IN BANKRUPTCY AND THE AUTOMATIC STAY IS STILL IN EFFECT.

ADDITIONALLY, A TAXPAYER'S NAME WILL BE EXCLUDED OR REMOVED FROM ANY PUBLIC POSTING IN THE EVENT THE DEPARTMENT IS NOTIFIED IN WRITING THAT THE TAXPAYER IS DECEASED.

PLEASE PROVIDE WRITTEN BASIS FOR EXCLUSION TO THE <u>DIVISION</u>
<u>OF COLLECTIONS</u>, <u>P.O. BOX 491</u>, <u>FRANKFORT</u>, <u>KY 40602</u>. OR E-MAIL

IT TO <u>KRC.WEBRESPONSENOTICEOFT AXDUE@KY.GOV</u>.

61A255

# KENTON COUNTY KENTUCKY PROPERTY TAX STATEMENT - PUBLIC SERVICE COMPANY REAL & TANGIBLE TAX

TAX YEAR: 2016

GNC: 007470

Charge of address

BILLING DATE: 12/19/16

NIXUTIL SANITATION ASSOC INC RICK MAINS 2047 LINCOLN DR INDEPENDENCE, KY 41051

Type code\_: S sewer private owned

	REAL ES	TATE		TANGIBLE	3		MAS
•	Rate	Assessment	Tax Amount	Rate	Assessment	Tax Amount	Potai
KENTON COUNTY	0.14800	5,000	7.40	0.20400	76,600	156.26	163.66
N.K.A.P.C.	0.02900	5,000	1.45	0.02933	76,600	22.47	23.92
HEALTH	0.02000	5,000	1:00	0.02000	76,600	15.32	16.32
CO-OP EXT SRV	0.00954	5,000	0.48	0.01084	76,600	8.31	8.79
LIBRARY	0.11300	5,000	5.65	0.19710	76,600	150.98	156.63
BEECHWOOD SCHL	0.00000	0	0.00	0.00000	0	0.00	0.00
COMMON SCHL	0.62100	5,000	31.05	1 0.62100	76,600	475.69	506.74
COVINGTON SCHL	1.09900	0	0.00	1.14500	0	0.00	0.00
ERLANGER	0.92100	0	0.00	0.92100	0	0.00	0.00
LUDLOW SCHL	0.87400	0	0.00	0.87400	0	0.00	0.00
WALTON SCHL	1.13700	0	0.00	1.13700	0	0.00	0.00
BOONE/WAL FD	0.19900	0	0.00	0.20000	0	0.00	0.00
EDGEWOOD FD	0.00000	. 0	0.00	0.00000	0	0.00	0.00
ELSMERE FD	0.20000	0	0.00	0.20000	0	0.00	0.00
INDEPENDENCE FI	0.19500	0	0.00	0.20000	0	0.00	0.00
KENTON FD	0.20000	0	0.00	0.20000	0	0.00	0.00
PINER/FISK FD	0.20000	0	0.00	0.20000	0	0.00	0.00
RYLAND HTS FD	0.20000	0	0.00	0.14600	0	0.00	0.00

47.03

TOTAL DUE:

Please Remit to: KENTON COUNTY SHERIFF

SUITE 409 COVINGTON KY 41011

6	IF PAID BY	
Discount	0/00/00	
Face	1/18/17	876.06
Pen1:5%	2/17/17	919.85
Pen2:10%+10%Shrf	3/18/17	1,060.06
Interest 1%	4/17/17	1,070.68
Interest 2%	5/17/17	1,081.25
Interest 3%	6/16/17	1,091.88
Interest 4%	7/16/17	1,102.45
Interest 5%	8/15/17	1,113.06
Interest 6%	9/14/17	1,123.65

829.03

876.06

(TAXPAYER COPY)

fran020b 12/19/16 10:03-am

#### NARP

### Commonwealth of Kentucky Allson Lündergan Grimes, Secretary of

0038140 Alison Lundergan Grimes **KY Secretary of State** Received and Filed 4/24/2017 4:24:28 PM Fee receipt: \$15.00

Alison Lundergan Grimes Secretary of State P.O. Box 1150 Frankfort, KY 40602-1150 (502) 564-3490 http://www.sos.ky.gov

### **Annual Report Online Filing**

ARP

Company:

NIXUTIL SANITATION ASSOCIATION INC.

Company ID:

0038140

State of origin:

Kentucky-

Formation date:

7/24/1961 12:00:00 AM

Date filed:

4/24/2017 4:24:28 PM

Fee:

#### Principal Office

2048 LINCOLN DRIVE 2048 LINCOLN BRIVE INDEPENDENCE INDEPENDENCE, KY 41051

#### Registered Agent Name/Address

**RICK MAINS** 2047 LINCOLN DRIVE INDEPENDENCE, KY 41051

#### **Current Officers**

**Authorized Rep** President Secretary

James Holt Harold Brautigan Donna Brautigan

Bèl-Aire Place Independence KY 41051 2048 Lincoln Dr. Independence KY 41051 2048 Lincoln Dr. Independence Ky 41051

#### **Directors**

Director Director Director Harold Brautigan James Holt

Donna Brautigan

2048 Emcoln Dr. Independence KY 41051 11988 Bel-Air Place Independence KY 41051 2048 Lincoln Drive Independence KY 41051

#### Signatures

Signature Title

Domna Brautigan Treasurer



#### 2017 KENTON COUNTY TAX BILL

PAYABLE TO CHARLES L. KORZENBORN, SHERIFF See Reverse Side For Additional Information

**PRESORTED** FIRST CLASS MAIL US POSTAGE PAID CINCINNATI, OH PERMIT # 9714

Bill Number: 50358

Taxing District	Rate@100	Taxable Value	Tax Amount
COUNTY COMMON SCHOOL EXTENSION DIST HEALTH LIBRARY AREA PLANNING INDEPENDENCE FIR 911 Fee CNR	0.122000 0.122000 0.638000 0.020000 0.113000 0.029000 0.195000	J2	0.00 -0.00 -0.00 0.00 0.00 0.00 0.00 0.00 530.00
		Gross Tax Due	530.00

11961 CATALINA DR

THE SECOND COMPANY TO SECOND STREET, STORY AND ADDRESS OF THE	71 (57 178
Legal Description	
Legal Description   10177 ACS ESICATALINA DRINGL 6 CATALINA GARDENS	漫图
GARDENS MONTH END HELDE	ELE

Fair cash value: 22,500 Exemption\_

22,500

Taxable value :

	If Paid on or Before	Amount Due:
Discount	11/01/17	530.00
Face	12/31/17	530.00
Penalty 1	01/31/18	530.00
Penalty 2	04/15/18	530.00

, միլոնդինգիկանիկինիկինիիկիներիկումիչդնորդի P-1 T7 P1 \*\*\*\*\*\*AUTO\*\*5-DIGIT 41017 UMO009755 RICK MAINS 331 Bracht Piner Rd Crittenden KY 41030-8210

New Bank for Tax Payments -Heritage Bank

DEPOSITED WITH

HERITAGE BANK



#### THIS IS YOUR RECEIPT

WHEN MAKING A DEPOSIT AT A TELLERS WINDOW, ALWAYS OBTAIN OFFICIAL RECEPT. Checks and other items are received for deposit subject to provisions of the Uniform Commercial Code or any applicable collection agreement.

10/10/2017

3:49 PM

15 Tlr# 154 Seq#

Account XXXXXX5015

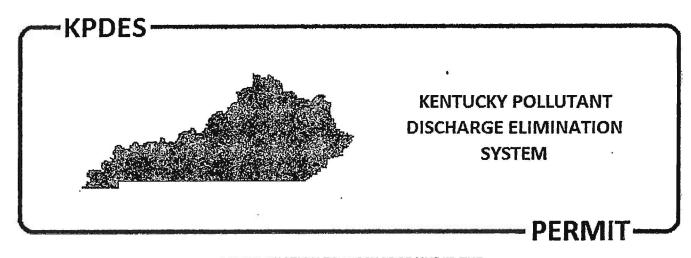
OTC LOCKBOX PAYMENT 530.00

- CERANK

FOR YOUR BUSINESS

RECEIVED

You Decide Coding 19/31/9017



## AUTHORIZATION TO DISCHARGE UNDER THE KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

**PERMIT NO.:** KY0075833

**AGENCY INTEREST NO.: 2443** 

Pursuant to Authority in KRS 224,

Nixutil Sanitation Association, Inc. 2048 Lincoln Drive Independence, Kentucky 41051

is authorized to discharge from a facility located at

Bel Aire Subdivision 11961 Catalina Drive Independence, Kenton County, Kentucky 41051

to receiving waters named

**Fowler Creek** 

in accordance with effluent limitations, monitoring requirements and other conditions set forth in this permit.

This permit shall become effective on January 1, 2018.

This permit and the authorization to discharge shall expire at midnight, December 31, 2022.

November 15, 2017

**Date Signed** 

Peter T. Goodmann, Director

Jara J linderson

**Division of Water** 

#### KPDES Permit KY0075833

#### THIS KPDES PERMIT CONSISTS OF THE FOLLOWING SECTIONS:

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#### KPDES Permit KY0075833

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# **SECTION 1**

# EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

#### 1. EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

#### 1.1. Compliance Monitoring Locations (Outfalls)

The following table lists the outfalls authorized by this permit, the latitude and longitude of each and the DOW assigned KPDES outfall number:

	Outfall Type Latitude (N) Longitude (W) Receiving Water Description of Outfall				
Outfall No.		Apr 200 1 10 Committee 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Longitude (W)	Receiving Water	Description of Outfall
001	External	38°54′43″	84°32′02″	Fowler Creek	Domestic Wastewater

#### 1.2. Effluent Limitations and Monitoring Requirements

Beginning on the effective date and lasting through the term of this permit, discharges from Outfall 001 shall comply with the following effluent limitations:

				TABL	E 2.				
	は大学に	EF	FLUENT LIMIT	ATIONS				MONITORING	REQUIREMENTS
the second of the second of	<b>第一种数点</b>	Loadings (lbs/day).		第二十二十	Conce	935 EFF. (\$)	e de la companya della companya della companya de la companya della companya dell		
Effluent Characteristic		Monthly Average	Maximum Weekly Average	Minimum	Monthly Average	Maximum Weekly Average	Maximum	Frequency	Sample Type
Flow	MGD	Report	Report	N/A	N/A	N/A	N/A	1/Quarter	Instantaneous
рН	SU	N/A	N/A	6.0	N/A	N/A	9.0	1/Quarter	Grab
CBODs1	mg/l	N/A	N/A	N/A	30	45	N/A	1/Quarter	Composite <sup>2</sup>
Total Suspended Solids	mg/l	N/A	N/A	N/A	30	45	N/A	1/Quarter	Composite <sup>2</sup>
Ammonia (as mg/l NH <sub>3</sub> N)									
May 1 – October 31	mg/l	N/A	N/A	N/A	4.0	6.0 <sup>3</sup>	N/A	1/Quarter	Composite <sup>2</sup>
November 1 – April 30	mg/l	N/A	N/A	N/A	10.0	15.0 <sup>3</sup>	N/A	1/Quarter	Composite <sup>2</sup>
Dissolved Oxygen	mg/l	N/A	N/A	7.0	N/A	N/A	N/A	1/Quarter	Grab
E. Coli <sup>4</sup>	#/100 mi	N/A	N/A	N/A	130 <sup>5</sup>	240 <sup>6</sup>	N/A	1/Quarter	Grab
Total Residual Chlorine	mg/l	N/A	N/A	N/A	0.011	0.019 <sup>3</sup>	N/A	1/Quarter	Grab
10000 0 1									<del></del>

<sup>&</sup>lt;sup>1</sup>CBOD<sub>5</sub> − Carbonaceous Biochemical Oxygen Demand, 5-day

<sup>&</sup>lt;sup>2</sup>A sample composed of four or more equal or flow-proportional aliquots collected over a period of no less than eight and no more than twenty-four hours and aggregated so that the aggregate sample reflects the average water quality of the effluent during the compositing or sample period

<sup>3</sup>Daily Maximum

<sup>&</sup>lt;sup>4</sup>E. Coli – Escherichia Coli Bacteria

#### KPDES Permit KY0075833

	EFFLUENT LIMITATIONS	TABLE 2.	MONITORING REQUIREMENTS
Effluent Characteristic Units	Loadings (lbs/day)  Monthly Maximum  Average Weekly Minimu	Concentrations  Monthly Maximum  Average Weekly N	laximum Frequency Sample Type.
<sup>5</sup> Thirty (30) day Geometric Mean <sup>6</sup> Seven (7) day Geometric Mean	Average	Average:	

#### 1.3. Standard Effluent Requirements

The discharges to Waters of the Commonwealth shall not produce floating solids, visible foam or a visible sheen on the surface of the receiving waters.

# SECTION 2 STANDARD CONDITIONS

#### 2. STANDARD CONDITIONS

The following conditions apply to all KPDES permits.

#### 2.1. Duty to Comply

The permittee must comply with all conditions of this permit. Any permit noncompliance constitutes a violation of KRS Chapter 224 and is grounds for enforcement action; for permit termination, revocation and reissuance, or modification; or denial of a permit renewal application. Any person who violates applicable statutes or who fails to perform any duty imposed, or who violates any determination, permit, administrative regulation, or order of the cabinet promulgated pursuant thereto shall be liable for a civil penalty as provided at KRS 224.99.010.

#### 2.2. Duty to Reapply

If the permittee wishes to continue an activity regulated by this permit after the expiration date of this permit, the permittee must apply for a new permit.

#### 2.3. Need to Halt or Reduce Activity Not a Defense

It shall not be a defense for a permittee in an enforcement action that it would have been necessary to halt or reduce the permitted activity in order to maintain compliance with the conditions of this permit.

#### 2.4. Duty to Mitigate

The permittee shall take all reasonable steps to minimize or prevent any discharge or sludge use or disposal in violation of this permit which has a reasonable likelihood of adversely affecting human health or the environment.

#### 2.5. Proper Operation and Maintenance

The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by the permittee to achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of back-up or auxiliary facilities or similar systems which are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of the permit.

#### 2.6. Permit Actions

This permit may be modified, revoked and reissued, or terminated for cause. The filing of a request by the permittee for a permit modification, revocation and reissuance, or termination, or a notification of planned changes or anticipated noncompliance does not stay any permit condition.

#### 2.7. Property Rights

This permit does not convey any property rights of any sort, or any exclusive privilege.

#### 2.8. Duty to Provide Information

The permittee shall furnish to the Director, within a reasonable time, any information which the Director may request to determine whether cause exists for modifying, revoking and reissuing, or terminating this permit or to determine compliance with this permit. The permittee shall also furnish to the Director upon request, copies of records required to be kept by this permit.

#### 2.9. Inspection and Entry

The permittee shall allow the Director, or an authorized representative (including an authorized contractor acting as a representative of the Administrator), upon presentation of credentials and other documents as may be required by law, to:

- (1) Enter upon the permittee's premises where a regulated facility or activity is located or conducted, or where records must be kept under the conditions of this permit;
- (2) Have access to and copy, at reasonable times, any records that must be kept under the conditions of this permit;
- (3) Inspect at reasonable times any facilities, equipment (including monitoring and control equipment), practices, or operations regulated or required under this permit; and
- (4) Sample or monitor at reasonable times, for the purposes of assuring permit compliance or as otherwise authorized by the Clean Water Act, any substances or parameters at any location.

#### 2.10. Monitoring and Records

- (1) Samples and measurements taken for the purpose of monitoring shall be representative of the monitored activity.
- (2) Except for records of monitoring information required by this permit related to the permittee's sewage sludge use and disposal activities, which shall be retained for a period of at least five (5) years (or longer as required by 401 KAR 5:065, Section 2(10) [40 CFR 503]), the permittee shall retain records of all monitoring information, including all calibration and maintenance records and all original strip chart recordings for continuous monitoring instrumentation, copies of all reports required by this permit, and records of all data used to complete the application for this permit, for a period of at least three (3) years from the date of the sample, measurement, report or application. This period may be extended by request of the Director at any time.
- (3) Records of monitoring information shall include:
  - a) The date, exact place, and time of sampling or measurements;
  - b) The individual(s) who performed the sampling or measurements;
  - c) The date(s) analyses were performed;
  - d) The individual(s) who performed the analyses;
  - e) The analytical techniques or methods used; and
  - f) The results of such analyses.
- (4) Monitoring must be conducted according to test procedures approved under 401 KAR 5:065, Section 2(8) [40 CFR 136] unless another method is required under 401 KAR 5:065, Section 2(9) or (10) [40 CFR subchapters N or O].
- (5) KRS 224.99-010 provides that any person who knowingly violates KRS 224.70-110 or other enumerated statutes, or who knowingly renders inaccurate any monitoring device or method required to be maintained under this permit shall be guilty of a Class D felony and, upon conviction, shall be punished by a fine of not more than \$25,000, or by imprisonment for not more than one (1) year, or both. Each day upon which a violation occurs shall constitute a separate violation.

#### 2.11. Signatory Requirement

(1) All applications, reports, or information submitted to the Director shall be signed and certified pursuant to 401 KAR 5:060, Section 4 [40 CFR 122.22].

(2) KRS 224.99-010 provides that any person who knowingly provides false information in any document filed or required to be maintained under KRS Chapter 224 shall be guilty of a Class D felony and upon conviction thereof, shall be punished by a fine not to exceed twenty-five thousand dollars (\$25,000), or by imprisonment, or by fine and imprisonment, for each separate violation. Each day upon which a violation occurs shall constitute a separate violation

#### 2.12. Reporting Requirements

#### 2.12.1. Planned Changes

The permittee shall give notice to the Director as soon as possible of any planned physical alterations or additions to the permitted facility. Notice is required only when:

- (1) The alteration or addition to a permitted facility may meet one (1) of the criteria for determining whether a facility is a new source in KRS 224.16-050 [40 CFR 122.29(b)]; or
- (2) The alteration or addition could significantly change the nature or increase the quantity of pollutants discharged. This notification applies to pollutants which are subject neither to effluent limitations in the permit, nor to notification requirements under KRS 224.16-050 [40 CFR 122.42(a)(1)].
- (3) The alteration or addition results in a significant change in the permittee's sludge use or disposal practices, and such alteration, addition, or change may justify the application of permit conditions that are different from or absent in the existing permit, including notification of additional use or disposal sites not reported during the permit application process or not reported pursuant to an approved land application plan.

#### 2.12.2. Anticipated Noncompliance

The permittee shall give advance notice to the Director of any planned changes in the permitted facility or activity which may result in noncompliance with permit requirements.

#### 2.12.3. Transfers

This permit is not transferable to any person except after notice to the Director. The Director may require modification or revocation and reissuance of the permit to change the name of the permittee and incorporate such other requirements as may be necessary under KRS 224 [CWA; see 40 CFR 122.61; in some cases, modification or revocation and reissuance is mandatory].

#### 2.12.4. Monitoring Reports

Monitoring results shall be reported at the intervals specified elsewhere in this permit.

- (1) Monitoring results must be reported on a Discharge Monitoring Report (DMR) or forms provided or specified by the Director for reporting results of monitoring of sludge use or disposal practices.
- (2) If the permittee monitors any pollutant more frequently than required by the permit using test procedures approved under 401 KAR 5:065, Section 2(8) [40 CFR 136], or another method required for an industry-specific waste stream under 401 KAR 5:065, Section 2(9) or (10) [40 CFR subchapters N or O], the results of such monitoring shall be included in the calculation and reporting of the data submitted in the DMR or sludge reporting form specified by the Director.
- (3) Calculations for all limitations which require averaging of measurements shall utilize an arithmetic mean unless otherwise specified by the Director in the permit.

#### 2.12.5. Compliance Schedules

Reports of compliance or noncompliance with, or any progress reports on, interim and final requirements contained in any compliance schedule of this permit shall be submitted no later than fourteen (14) days following each schedule date.

#### 2.12.6. Twenty-four-Hour Reporting

- (1) The permittee shall report any noncompliance which may endanger health or the environment. Any information shall be provided orally within twenty-four (24) hours from the time the permittee becomes aware of the circumstances. A written submission shall also be provided within 5 days of the time the permittee becomes aware of the circumstances. The written submission shall contain a description of the noncompliance and its cause; the period of noncompliance, including exact dates and times, and if the noncompliance has not been corrected, the anticipated time it is expected to continue; and steps taken or planned to reduce, eliminate, and prevent reoccurrence of the noncompliance.
- (2) The following shall be included as information which must be reported within twenty-four (24) hours under this paragraph.
  - a) Any unanticipated bypass which exceeds any effluent limitation in the permit. (See §122.41(g))
  - b) Any upset which exceeds any effluent limitation in the permit.
  - c) Violation of a maximum daily discharge limitation for any of the pollutants listed by the Director in the permit to be reported within twenty-four (24) hours.
- (3) The Director may waive the written report on a case-by-case basis under 40 CFR 122.41 (I), if the oral report has been received within twenty-four (24) hours.

#### 2.12.7. Other Noncompliance

The permittee shall report all instances of noncompliance not reported under Sections 2.12.1, 2.12.4, 2.12.5 and 2.12.6, at the time monitoring reports are submitted. The reports shall contain the information listed in Section 2.12.6.

#### 2.12.8. Other Information

Where the permittee becomes aware that it failed to submit any relevant facts in a permit application, or submitted incorrect information in a permit application or in any report to the Director, it shall promptly submit such facts or information.

#### 2.13. Bypass

#### 2.13.1. Definitions

- (1) Bypass means the intentional diversion of waste streams from any portion of a treatment facility.
- (2) Severe property damage means substantial physical damage to property, damage to the treatment facilities which causes them to become inoperable, or substantial and permanent loss of natural resources which can reasonably be expected to occur in the absence of a bypass. Severe property damage does not mean economic loss caused by delays in production.

#### 2.13.2. Bypass Not Exceeding Limitations

The permittee may allow any bypass to occur which does not cause effluent limitations to be exceeded, but only if it also is for essential maintenance to assure efficient operation. These bypasses are not subject to the provisions of Section 2.13.3 and 2.13.4.

#### 2.13.3. Notice

- (1) Anticipated bypass. If the permittee knows in advance of the need for a bypass, it shall submit prior notice, if possible at least ten (10) days before the date of the bypass.
- (2) Unanticipated bypass. The permittee shall submit notice of an unanticipated bypass as required in Section 2.12.6.

#### 2.13.4. Prohibition of Bypass

- (1) Bypass is prohibited, and the Director may take enforcement action against a permittee for bypass, unless:
  - a) Bypass was unavoidable to prevent loss of life, personal injury, or severe property damage;
  - b) There were no feasible alternatives to the bypass, such as the use of auxiliary treatment facilities, retention of untreated wastes, or maintenance during normal periods of equipment downtime. This condition is not satisfied if adequate back-up equipment should have been installed in the exercise of reasonable engineering judgment to prevent a bypass which occurred during normal periods of equipment downtime or preventive maintenance; and
  - c) The permittee submitted notices as required under Section 2.13.3.
- (2) The Director may approve an anticipated bypass, after considering its adverse effects, if the Director determines that it will meet the three (3) conditions listed above in Section 2.13.4

#### 2.14. Upset

#### 2.14.1. Definition

Upset means an exceptional incident in which there is unintentional and temporary noncompliance with technology-based permit effluent limitations because of factors beyond the reasonable control of the permittee. An upset does not include noncompliance to the extent caused by operational error, improperly designed treatment facilities, inadequate treatment facilities, lack of preventive maintenance, or careless or improper operation.

#### 2.14.2. Effect of an Upset

An upset constitutes an affirmative defense to an action brought for noncompliance with such technology-based permit effluent limitations if the requirements of Section 2.14:3 are met. No determination made during administrative review of claims that noncompliance was caused by upset, and before an action for noncompliance, is final administrative action subject to judicial review.

#### 2.14.3. Conditions Necessary for a Demonstration of Upset

A permittee who wishes to establish the affirmative defense of upset shall demonstrate, through properly signed, contemporaneous operating logs, or other relevant evidence that:

- (1) An upset occurred and that the permittee can identify the cause(s) of the upset;
- (2) The permitted facility was at the time being properly operated; and
- (3) The permittee submitted notice of the upset as required in Section 2.12.6; and
- (4) The permittee complied with any remedial measures required under Section 2.4.

#### 2.14.4. Burden of Proof

In any enforcement preceding the permittee seeking to establish the occurrence of an upset has the burden of proof.

# SECTION 3 OTHER CONDITIONS

#### 3. OTHER CONDITIONS

#### 3.1. Schedule of Compliance

The permittee shall attain compliance with all requirements of this permit on the effective date of this permit unless otherwise stated.

#### 3.2. Other Permits

This permit has been issued under the provisions of KRS Chapter 224 and regulations promulgated pursuant thereto. Issuance of this permit does not relieve the permittee from the responsibility of obtaining any other permits or licenses required by this Cabinet and other state, federal, and local agencies.

#### 3.3. Continuation of Expiring Permit

This permit shall be continued in effect and enforceable after the expiration date of the permit provided the permittee submits a timely and complete application in accordance with 401 KAR 5:060, Section 2(4).

#### 3.4. Antidegradation

For those discharges subject to the provisions of 401 KAR 10:030, Section 1(3)(b)5, the permittee shall install, operate, and maintain wastewater treatment facilities consistent with those identified in the SDAA submitted with the KPDES permit application.

#### 3.5. Reopener Clause

This permit shall be modified, or alternatively revoked and reissued, to comply with any applicable effluent standard or limitation issued or approved in accordance with 401 KAR 5:050 through 5:080, if the effluent standard or limitation so issued or approved:

- (1) Contains different conditions or is otherwise more stringent than any effluent limitation in the permit; or
- (2) Controls any pollutant not limited in the permit.

The permit as modified or reissued under this paragraph shall also contain any other requirements of KRS Chapter 224 when applicable.

#### 3.6. Connection to Regional Sewer System

This WWTP is temporary and in no way supersedes the need of a regional sewer system. The permittee shall eliminate the discharge and WWTP plant by connection to a regional sewer system when it becomes available as defined in 401 KAR 5:002.

#### 3.7. Certified Operators

The wastewater treatment plant shall be under the primary responsibility of a Class I Wastewater Treatment Plant Certified Operator or higher.

#### 3.8. Outfall Signage

The KPDES permit establishes monitoring points, effluent limitations, and other conditions to address discharges from the permitted facility. In an effort to better document and clarify these locations the permittee should place and maintain a permanent marker at each of the monitoring locations.

# **SECTION 4**

MONITORING AND REPORTING REQUIREMENTS

#### 4. MONITORING AND REPORTING REQUIREMENTS

#### 4.1. KPDES Outfalls

Discharge samples and measurements shall be collected at the compliance point for each KPDES Outfall identified in this permit. Each sample shall be representative of the volume and nature of the monitored discharge.

#### 4.2. Sufficiently Sensitive Analytical Methods

Analytical methods utilized to demonstrate compliance with the effluent limitations established in this permit shall be sufficiently sensitive to detect pollutant levels at or below the required effluent limit, i.e. the Method Minimum Level shall be at or below the effluent limit. In the instance where an EPA-approved method does not exist that has a Method Minimum Level at or below the established effluent limitation, the permittee shall:

- (1) Use the method specified in the permit; or
- (2) The EPA-approved method with an ML that is nearest to the established effluent limit.

It is the responsibility of the permittee to demonstrate compliance with permit parameter limitations by utilization of sufficiently sensitive analytical methods.

#### 4.3. Certified Laboratory Requirements

All laboratory analyses and tests required to demonstrate compliance with the conditions of this permit shall be performed by EEC certified general wastewater laboratories.

#### 4.4. Submission of DMRs

The completed DMR for each monitoring period must be entered into the DOW approved electronic system no later than midnight on the 28<sup>th</sup> day of the month following the monitoring period for which monitoring results were obtained.

For more information regarding electronic submittal of DMRs, please visit the Division's website at: <a href="http://water.ky.gov/permitting/Pages/netDMRInformation.aspx">http://water.ky.gov/permitting/Pages/netDMRInformation.aspx</a> or contact the DMR Coordinator at (502) 564-3410.

Belle nov 1 2016 three Dec 2016 Orovided by Daraety

4055

#### COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE FRANKFORT, KY 40619

NOTICE DATE 10/04/2016 PERIOD

01/01/2016-12/31/2016

TAX

PUBLIC SERVICE COMPANY

NOTICE # 108373870

RETURN VAL# 000007470 TAXPAYER~ID 610891336

610891336035

CASE

TAXPAYER NAME
NIXUTIL SANITATION ASSOC INC

FOR QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT:

ROBERT 3569

DEPARTMENT OF REVENUE STATION NUMBER 32

P 0 BOX 491

FRANKFORT

KY 40601

TEL: (502) 564-8175 FAX: (502) 564-8192

OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

#### EXPLANATION OF NOTICE

THE PUBLIC SERVICE COMPANY RETURN WAS RECEIVED AND THE PROPERTY TAX DUE HAS BEEN CALCULATED. LOCAL PROPERTY TAXES WILL BE BILLED SEPARATELY BY LOCAL JURISDICTIONS. KRS 136.180(2)

TAX LIABILITY

TOTAL LIABILITY

TOTAL LIABILITY

TOTAL AMOUNT OF TAX 350.80

TOTAL DUE:

TAX LIABILITY

350.80

TOTAL AMOUNT OF TAX 350.80

350.80

<>< EXPLANATION OF NOTICE CONTINUED ON NEXT PAGE >>>>



PACE Analytical Services, Inc. 25 Holiday Drive Englewood, OH 45322

TEL: (937) 832-8242

Remit To:

PACE Analytical Services, Inc.

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242 INVOICE

Invoice No: 1609433

INV DATE: Print DATE:

£0/27/£6 12/12/2016

Invoice To:

Nixutil Sanitation

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn:

Harold Brautigan

Phone:

(859) 356-2326

Work Order:

16J1058

0124/16 10/24/11/21 Order Name:

Quarterly KPDES KY0075833

PO Number:

Date Received

10/19/16

Item	Matrix	Quantity	Unit Price	Quoted	Extended Cost
TSS [7 day]	Water	r.	\$30,00-,	\$15.50	\$1 <i>5</i> .50
NKY_BACT_ECOLI_W_24 [7 day]	Water	1	\$95.00	\$42.00	\$42.00
NH3 [7 day]	Water	1	\$30.00	\$26.50	\$26.50
CBOD [7 day]	Water	1	\$80.00	\$26.50	\$26.50
Additional Items					
Sample Handling & Disposal Fee		1		\$25.00	\$25.00

INVOICE Total:

\$135.50

All invoices are due and payable net 30 days from receipt.



Service Address 11961 CATALINA DR

**Customer Number** 

Online Banking Acct.#:

**Account Number** 

Prior Balance \$31.52

**Payments** \$-31.52

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** \$31.52

**Total Amount Due** \$31.52

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address:

PO Box 18640

**Billing Date** 10/31/2016

Payment Due ON or BEFORE Payment Due after Due Date

Erlanger, KY 41018-0640

Meter Reading Data

12/05/2016

Any Questions? Please call us at 859.578.9898 Monday - Friday

8:00 AM - 5:00 PM

\*\*Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

\*\*How to pay your bill: OVER THE PHONE via our 24/7 automated system. ONLINE-NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

Meter#	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20033496		2016-07-14	2016-10-14	92	Regular	7	7	0	HCF
						Total Usan	e Billed:	0	HCF

		•			1.00	
Current Charges Detail S	ervice Period:	07/14/20	016 - 10/14/2	016	- 4	1
Previous Balance	*			4	19	\$31.52
Payment - Thank You	D.					\$-31.52
Current Charges Detail:			-	1		
Fixed Service Charge				*	2	\$30.60
School Taxes - Kenton Count	y					\$0.92
Current Charges for 11961 C	ATALINA DR	a a				\$31.52

**Usage History** 

Read Date	Days	Usage	
2016-10-14	92	0 HCF	
2016-07-14	91	0 HCF	
2016-04-14	91	5 HCF	
2016-01-14	92	0 HCF	
2015-10-14	92	0 HCF	
2015-07-14	91	0 HCF	

Amount Due ON or BEFORE 12/05/2016...... \$31.52

Due date is for CURRENT bill only. Any account with a previous amount due is subject to disconnection.



Main Office 8205 Highway 127 N P.O. Box 400 Owenton, Kentucky 40359-0400 800/372-7612 Fax 502/484 -2661 www.owenelectric.com

Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

ACCOUNT NUMBER		ACCOUNT NAI	VIE.	12		SERVI	E ADDRESS	METERINUMBER	BILL DATE
Ī	NIXUTIL S	ANITATION	ASSOC INC		11968	CATALIN	IA DRIVE - SEWE	R 175414	11/29/16
SERVICE PER	2.20	NO. DAYS	METI Previous	ER REA		CODE		LLED KILLOWATIT	CHARGES
-0.003950 ENVIRONM LOCAL SCI	ENTAL SUR 400L TAX- 3 ES TAX- 6% NT BILL DUE DUNT DUE DR YOUR PA	3%	7.870%	1285	9	R	1	2664 2664	255.0 -10.5 19.2 7.9 16.3 287.9 264.3 -264.3 287.9
OL J	87 9 H		) Ze Location)		7141	137048	<b>TELEPHONE</b>	(859) 363-5263	7
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG: KWHIDAY.	CY	CLE		TOTAL ACC	COUNT BALANCE	\$287.9
CURRENT BILLING PERIOD		2664	95		19	CURRE	TO A TO A STREET WARRIES	7/16 BILL IS DELINQUE	AND DESCRIPTION OF THE PERSON
PREVIOUS BILLING PERIOD		2464	82		CLASS	CONTINE	All the state of t	والمراد والمناسطين المرادل الماصد والمستداد والمستدان	Var Brown to a court of where hit is the about the
SAME PERIOD LAST YEAR	29	2131	73	3	52		AFIE	R DUE DATE PAY	\$301.

#### IMPORTANT INFORMATION

Your Electricity Use Over The Last 13 Months

3,193 2,129

1,064

Due date is for CURRENT month's bill only.
Any account with a previous amount due is subject to disconnection.
Please allow ample time for delivery before the due date when mailing your payment.
Write account number on your check

Visit us at: www.owenelectric.com

To view/pay your bill and see our other services.

OWEN ELECTRIC'S OFFICES WILL BE CLOSED CHRISTMAS & NEW YEAR

HOLIDAYS DEC. 23/26,DEC. 30/JAN 2. OUR VIRTUAL OFFICE OPEN

24/7 AT owenelectric.com; CALL 800.372.7612 FOR EMERGENCY!

ASK ABOUT THESE SERVICES & PRODUCTS
Automatic Bank / Credit Card Bill Payment



Main Office 8205 Highway 127 N P.O. Box 400 Owenton, Kentucky 40359-0400 800/372-7612 Fax 502/484 -2661 www.owenelectric.com

Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

ACCOUNT NUMBER		ACCOUNT NA	MES		SERVIC	EADDRESS.		METER NUMBER	BILL DATE
	NIXUTIL S	ANITATION	ASSOC INC	11968	CATALIN	A DRIVE - S	SEWER	175414	10/28/16
SERVICE PERIO	" A 18 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	NO. DAYS)	METI PREVIOUS:	eri reading Presenti	CODE	METER MULTIPLIER	BILLED DEMAND	KILOWATH HOURS	CHARGES
09/26/16 10 -0.003360 ENVIRONME LOCAL SCHO STATE SALE TOTAL CURREN PREVIOUS AMO THANK YOU FOR	ENTAL SURI OOL TAX- 3 ES TAX- 6% T BILL DUE UNT DUE R YOUR PA	11/17/16	5.500%	10195	R P	1		2464 2464	237.7 -8.2 12.6 7.2 14.9 264.3 333.0 -333.0 264.3
NEXT METER READING DA	TE 11/23/	16 SERVIO	E LOCATION	714	11137048	TELE	PHONE (8	59) 363-5263	<del></del>
and the property of the party o	DAYSSERVICE	TOTAL KWH	AVG. KWH/DAY	CYCLE'	\$	TOTA	L ACCOU	NT BALANCE	\$264.3
COMPARISONS	Town to the state of the				1				
COMPARISONS CURRENT BILLING PERIOD: PREVIOUS BILLING PERIOD:	30 32	2464 3193	82 100	619 RATE CLASS	CURREN	TRH DIE	11/17/16	BILL IS DELINQUE	NT AFTER DUE DA



Your Electricity Use Over The Last 13 Months

3,193

ONE OF THE SIMPLIEST WAYS TO SAVE ON ENERGY COSTS IS BY INSTALLING AND USING A PROGRAMABLE THERMOSTAT. MAKING THIS MOVE COULD REDUCE YOUR HEATING COSTS BY 10%!

#### IMPORTANT INFORMATION

Due date is for CURRENT month's bill only.
Any account with a previous amount due is subject to disconnection.
Pleuse allow ample time for delivery before the due date when mailing your payment.
Write account number on your check.
Return the bottom portion of this bill with your payment.

To Report a Power Outage, Call 1-800-372-7612

Visit us at: www.owenelectric.com

To view/pay your bill and see our other services.

ASK ABOUT THESE SERVICES & PRODUCTS
Automatic Bank / Credit Card Bill Payment

E-Billing (Eliminates Paper Bills)
Levelized Budget Billing
EnviroWatts Green Power
HomeGard Surge Protection

Crone Environmental Services Carl W. Crone 4576 River Rd. Hebron Ky. 41048 Invoice No. Phone Numbers Home 586-6005 Cell 250-8338

Name	Nixutil Sanitation Assocaition WWTP	Amount
Date	Services	
July-Sept.	Quarterly service charge for operation at the Treatment Plant	\$930.00
	Flow measurement & Field Lab Fees	\$225.00
	Sludge Hauled	\$1,000.00
	Chlorine Tablets	\$675.00
	De-clor Tablets	\$300.00
	Service Blower & Belts	\$100.00
	Sampler rental & sampling	\$35.00

Total

\$3,265.00

2266

1265

100 S

9 d 500 18/16

#### STATEMENT

Face Analytical
The Right Chemistry, The Right Solution®

Date: 12/2/2016 Account:

Payment Terms: NET 30 DAYS

To: NIXUTIL SANITATION
RICK MAINS
2047 LINCOLN DR.
INDEPENDENCE KY 41051

Part 16 128 50 ck 35.50

Vanessa Heslep Phone # (937) 572-4851 Vanessa.Heslep@pacelabs.com

Invoice No.	Date	Code	Pace Project No.	Client Reference No. / Client Project	Original Involce Amount	Current Invoice Balance
1609433	10/27/2016	SLS <sup>-</sup>	Proj# 16J1058	Quarterly KPDES KY00	\$135.50	\$135.50
						8
	6.00 6.00 6.00 6.00 6.00 6.00 6.00 6.00					
N.	9				:	
					2	
		,				
					`	14
Please Pamit Payme				· · · · · · · · · · · · · · · · · · ·	Amount Due:	\$135.50

Please Remit Payment To:

Pace Analytical Services, LLC P.O. Box 684056 Chicago IL 60695-4056

1.5% Finance Charge Assessed on all Past Due Invoices

Aged as of: 12/2/2016

\$0.00 \$135.50 \$0.00 \$0.00	21 and Over	91 -120 Days	61 - 90 Days	31 - 60 Days	0-30 Days
	\$0.00	\$0.00	\$0.00	\$135.50	\$0.00

codes: SLS = Sales / Invoices

DR = Debit Memos

PMT = Payments

CR = Credit Memos

FIN = Finance Charges



Service	Address
11961 CAT	TALINA DR
From	То
02/01/2018	04/30/2018
Mailing	Address

NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-ID.
Due Date for Current Charges	Amount Due
06/13/2018	\$40.35

Amount Due \$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Serv	ice .	Previous (eading)	Current Reading	or Usage Factor or Net ERU's	Amount
Stormwater-COMM/ Sales Tax	Regular Charge	5802.06 GD 12 D 3 D	2.3	2.3	\$34.78 \$2.09
					75 11.7
Previous Balances	Net Payments	Adjustments	Past Due Balances	Current Charges	Amount Due

Bieen 2018

Dorra Branting and





Service	Address				
11961 CATALINA DR					
From	To				
08/01/2018	10/31/2018				
Mailing	Address				

#### NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-ID
Due Date for	Amount Due
Current Charges	After Due Date
12/14/2018	\$40.35

## Amount Due \$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Service		Previous Reading of Impervious Area			sage Facto r Net ERU'		Amount
Stormwater-COMM/Regula Sales Tax	al ot	70.5802.06			2.3		\$34.78 \$2.09
	3le sypt	na w sac Wangpaya babasa s		(4 in			
Previous Balances Net	Payments	110 (100 cm)		Current	Charges	, Amo	ount Due
\$36.87	(\$36.87)	\$0.00	\$0.00		\$36.87		\$36.87







Servi	ce Address
11961 C	ATALINA DR
From	I To
11/01/2017	01/31/2018
Mailin	a Address

<b>NIXUTIL SANITATION ASSN INC</b>
2048 LINCOLN DR
INDEPENDENCE KY 41051
HERALD BRUTIGHN

Account No.	E-JD
Due Date for	Amount Due
Current Charges	After Due Date
03/15/2018	\$40.35

#### Amount Due

\$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

# ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

Sen	/ice	Previous Reading Impervious Area	or Current Readin	g or Usage Facto or Net ERU's	
Stormwater-COMM/ Sales Tax	Regular Charge	5802.06 ©	<u>2.3</u> ©	2.3	\$34.78 \$2.09
Previous Balances	Net Payments	Adjustments	Past Due Balances	Current Charges	"Amount Due
	(\$36.87)	\$0.00	\$0.00	\$36.87	\$36.87







Service	Address
11961 CA	TALINA DR
From	То
05/01/2018	07/31/2018
Mailing	Address

#### NIXUTIL SANITATION ASSN INC 2048 LINCOLN DR INDEPENDENCE KY 41051 HERALD BRUTIGHN

Account No.	E-ID
Due Date for Current Charges	Amount Due
09/12/2018	\$40.35

## Amount Due \$36.87

A delinquency charge of 10% will be added to your total current charges if your payment is not received by the due date.

## ALL PAST DUE BALANCES MUST BE PAID IMMEDIATELY

Failure to pay the past due balance may lead to your water service being disconnected and an additional fee will be required.

. Serv	ice	Previous Reading of Impervious Area	The state of the s		
Stormwater-COMM// Sales Tax	Regular Charge	5802.06	1 0000	2.3 28/16/18	\$34.78 \$2.09
Previous Balances	Net Payments	Adjustments	Past Due Balances	Current Charges	Amount Due
\$36.87	(\$36.87)	\$0.00	\$0.00	\$36.87	\$36.87

Beginning in August, SD1 customers will see a 5 percent increase in thier sanitary sewer bills. For more information visit www.sd1.org



## Dollar TREE STORES, INC.

(859) 356-1167 Store# 5870 2014 Harris Pike Independence KY 41051-9785 SERVICE CONTROL OF TOTAL PRICE DESCRIPTION GREETING CARD GREETING CARD ENVELOPES 1.00T 1.00 1.00 **ENVELOPES** 1.00 GLAZE FALL PUMPKIN GLAZE FALL PUMPKIN 1.00 1.001 1.00T 1.00 Sub Total \$0.3€ SALES TAX \$6.36 Total \$6.36 Visa \*\*\*\*\*\*\*\*\*5329 Approved Pur chase Chip Auth/Trace Number: 33650D/018167 Chip Card AID: A0000000031010 Thank You for Shopping at Dollar Tree Where Everything's \$1.00 Now Shop On-Line at Dollartree.com We value your opinion! Please provide your feedback at www.dollartreefeedback.com \* Receive chances to win \$1,000 daily plus\* instant prizes valued at \$1,500 weekly \* or by calling 1-877-368-2540. For complete rules, eligibility and sweepstakes period and previous vinners please visit www.dollartreefeedback.com No purchase/survey required to enter. Sweepstakes sponsored by Empathica, Inc. across multiple international clients. Survey Code: 9757 0380 0108 0106 We will gladly exchange any unopened item with original receipt. We do not offer refunds. \* 370 01 011 26323421 9/17/18 9:32 sociate: tracy

HNNUAR MAILED INDEPENDENCE 5106 MADISON PIKE **INDEPENDENCE** KY 41051-9998 2039600651 11/15/2018 (800) 275-8777 Product Sale Final Description Qty Price PM 2-Day \$6.70 Flat Rate Env (Domestic) (FRANKFORT, KY 40602) (Flat Rate) (Expected Delivery Date) (Saturday 11/17/2018) (USPS Tracking #) (9505 5158 6311 8319 3514 85) Insurance 1 \$0.00 (Up to \$50.00 included) Total \$6.70 Credit Card Remitd \$6.70 (Card Name: VISA) (Account #:XXXXXXXXXXXXXXX6574) (Approval #:33448D) (Transaction #:486) (AID: A0000000031010 Chip) (AL: Visa) (PIN: Not Required)

Includes up to \$50 insurance

Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

Save this receipt as evidence of insurance. For information on filing an insurance claim go to https://www.usps.com/help/claims.htm

> Preview your Mail Track your Packages Sign up for FREE @ www.informeddelivery.com

All sales final on stamps and postage Refunds for guaranteed services only Thank you for your business

5106 MADISON PIKE INDEPENDENCE 41051-9998 2039600651 (800) 275-8777 Description (Unit Price:\$50.00) First-Class Package Service Retail 3 Days (CLAYTON, NC 27520) (Weight:0 Lb 8.50 0z) (Estimated Delivery, Date) (Thursday 09/20/2018) (USPS Tracking #) (9500 1158 6311 8260 3301 61) \$54.10 Total \$54.10 Credit Card Remitd (Card Name: VISA) (Account #:XXXXXXXXXXXXXXX3329) (Approval #:91785D) (Transaction #:448) Chip) (AID: A0000000031010 (AL: Visa) (PIN: Not Required) Text your tracking number to 28777 (2USPS) to get the latest status. Standard Message and Data rates may

apply. You may also visit www.usps.com USPS Tracking or call 1-800-222-1811.

> Preview your Mail Track your Packages Sign up for FREE @ www.informeddelivery.com

All sales final on stamps and postage Refunds for guaranteed services only Thank you for your business

HELP US SERVE YOU BETTER

TELL US ABOUT YOUR RECENT



## **2018 KENTON COUNTY TAX BILL**

PAYABLE TO CHARLES L. KORZENBORN, SHERIFF 65 or Older? Other Questions? See Reverse Side For Information PRESORTED FIRST CLASS MAIL US POSTAGE PAID CINCINNATI, OH PERMIT # 9714

Bill Number: 50632	Re	eal Estate		
Taxing District	Rate@100	Taxable Value	Tax Amount	Property Location:
STATE	0.122000		0.00	11961 CATALINA DR
COMMON SCHOOL CO	0-155000 0.659000 0.010220		0.00 -0.00 -0.00	Legal Description Only Acs/Es/CATALINA DRING Lei CATALINA CARDENS
HEALTH	0.023000		0.00	
LIBRARY	0.113000		0.00	
PDS	0.029600	l l	0.00	Fair cash value: 22,500
INDEPENDENCE FIR	0.200000	(D)	0.00	Exemption: 22,500
911 Fee CNR	0.000000	10/18	530.00	Taxable value:
		Gross Tax Due -	530.00	

	If Paid on or Before	Amount Due:
Discount	11/01/18	530.00
Face	12/31/18	530.00
Penalty 1	01/31/19	530.00
Penalty 2	04/15/19	530.00

արժանգիկիկիրի բանականին անգրանինի համարանի

P-1 T23 P1 \*\*\*\*\*\*\*AUTO\*\*5-DIGIT 41017 UMO032044 RICK MAINS 331 BRACHT PINER RD CRITTENDEN KY 41030-8210

New Bank for Tax Payments -Heritage Bank

## **TaxBytes**

11939 Taylor Mill Rd Independence, KY 41051 US 859-356-4555 taxbytes@yahoo.com Invoice

BILL TO			(2)
Vixutil Sanata	ation As	sn Inc.	

Pa # 236

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS ENCLOSED.
5595	03/25/2019	\$200.00	04/24/2019	Net 30

ACTIVITY.	QIY	RATE	AM@UNT
Business Return	1	200.00	200.00

**BALANCE DUE** 

\$200.00

Det Jesport Det Jesport Journales Commendates

# COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE

OFFICE OF PROPERTY VALUATION
PUBLIC SERVICE BRANCH
STATION 32 4TH FL, 501 HIGH STREET
FRANKFORT, KY 40601-2103
Phone (502) 564-8175 Fax (502) 564-8192



## NOTICE OF ASSESSMENT

NIXUTIL SANITATION ASSOC INC ATTN: DONNA BRAUTIGAN 2048 LINCOLN DR INDEPENDENCE, KY 41051-0000 GNC:

007470

TYPE CO: TAX TYPE:

. E:

TAX ID:



This Notice of Assessment will become final on 02/05/2018, 45 days from the notice date. A corresponding Notice of Tax Due is being sent from the Compliance and Accounts Receivable System based on the Total Assessment shown below. The Notice of Tax Due will provide the state tax liability, any applicable interest and/or filing penalties that may be assessed. Local taxes will be billed separately by the local taxing jurisdictions where your property is located.

If you protest this assessment, see enclosed 61F009 Notification-Protesting your Assessment. You must submit a written protest in accordance with KRS 131.110; and as required by KRS 132.825(10) and KRS136.180(2), your protest must specify the valuation you claim to be true. Your written protest stating your claimed value and your payment of tax for your claimed value must be submitted to the Department of Revenue on or before 02/05/2018 or no further remedies will be available regarding this assessment per KRS 134.590. Submit your protest and payment to: ATTN: Public Service Branch, Division of State Valuation, KENTUCKY DEPARTMENT OF REVENUE, Sta. 32, 4th Floor, 501 High Street, Frankfort, KY 40601-2103. You may contact the Public Service Branch at Phone (502) 564-8175 and Fax (502) 564-8192.

**NOTICE DATE:** 

12/22/2017 TAX YEAR: 2017 (For Year Ending December 31, 2016)

PROPERTY CLASS	TAX RATE Per \$100	ASSE	SSED VALUE	STATE TAX DUE	
Subject to State and Local Tax					
Real Estate	0.122		\$70,115.00	\$85.54	
**Tangible Personal Property	0.45		\$1,885.00	\$8.48	
Business Inventory	0.05	*	\$0.00	\$0.00	
Inventory In Transit	0.00		\$0.00	\$0.00	
Subject to State Tax Only					
Foreign Trade Zone Property	0.001		\$0.00	\$0.00	
Recycling Equipment	0.45		\$0.00	\$0.00	
Manufacturing Machinery	0.15		\$0.00	\$0.00	
Pollution Control Equipment	0.15		\$0.00	\$0.00	
Telephonic Equipment	0.15		\$0.00	\$0.00	
Business Inventory (MM)	0.05	*	\$0.00	\$0.00	
Intangible NonOp	0.00		\$0.00	\$0.00	
Intangible NonOp	0.00		\$0.00	\$0.00	
IRB Property	0.015		\$0.00	\$0.00	
IRB Property Nontaxable	0.00		\$0.00	\$0.00	
* Excludes Motor Vehicles \$0.00	TOTALS		\$72,000.00	\$94.02	

A 10% penalty is charged for late filed returns per KRS 132.290(3). A 20% penalty is charged for omitted property per KRS 132.290(4). Applicable interest will be applied when late or omitted.

KENTON COUNTY KENTUCKY PROPERTY TAX STATEMENT - PUBLIC SERVICE COMPANY REAL & TANGIBLE TAX

BILLING DATE: 02/27/18

TAX YEAR: 2017

NIXUTIL SANITATION ASSOC INC ATTN: DONNA BRAUTIGAN

2048 LINCOLN DR

61A255

GNC: 007470

fran020b

INDEPENDENCE, KY 41051-0000

02/27/18

03:55-pm

Type code : S	sewer	private owned						3/5/1	, 19D	22
-,pc	REAL ES	-			TANGIBI	Æ			<i>V</i>	
	Rate	Assessment	Tax Amount		Rate	Assessment	Tax Amount	InvTran Asmt	Tax Amount	Total
KENTON COUNTY	0.14800	70,115	103.77	T	0.20400	1,885	3.85			107.62
PDS	0.02900	70,115	20.33	ı	0.02933	1,885	0.55	0	0.00	20.88
HEALTH	0.02000	70,115	14.02	i	0.02000	1,885	0.38	0	0.00	14.40
CO-OP EXT SRV	0.00986	70,115	6.91	- 1	0.01143	1,885	0.22	0	0.00	7.13
LIBRARY	0.11300	70,115	79.23		0.19710	1,885	3.72	0	0.00	82.95
COVINGTON SCHL	1.11800	0	0.00	1	1.14900	0	0.00			0.00
KC COMMON SCHL	0.63800	70,115	447.33	1	0.63800	1,885	12.03			459.36
LUDLOW SCHL	0.90800	0	0.00	- 1	0.90800	0	0.00			0.00
WALTON SCHL	1.13700	0	0.00	ı	1.13700	0	0.00		(4)	0.00
BOONE/WAL FD	0.19900	0	0.00	ï	0.20000	. 0	0.00	0	0.00	0.00
ELSMERE FD	0.20000	0	0.00		0.00000	0	0.00	0	0.00	0.00
INDEPENDENCE FD		Ō	0.00	i	0.20000	0	0.00	0	0.00	0.00
KENTON FD	0.20000	0	0.00	- 1	0.20000	0	0.00	0	0.00	0.00
PINER/FISK FD	0.20000	0	0.00	- 1	0.20000	0	0.00	0	0.00	0.00
RYLAND HTS FD	0.20000	0	0.00		0.15900	0	0.00	0	0.00	0.00
19	154		671.59			_	20.75		0.00	
			*					4		30
		*					TOTAL DUE:			692.34
					No.		IF PAID BY	Con a		
Please Remit t			IFF			Discount	0/00/00	500 24		V .
		OURT STREET				Face	3/29/18	692.34		4
*)	SUITE					Pen1:5% Pen2:10%+10%Sh;	4/28/18 cf 5/28/18	726.97 837.73		
	COVIN	GTON KY 41011				Penz:10*+10*5m Interest 1%	6/27/18	846.12		
÷						Interest 1% Interest 2%	7/27/18	854.49		
						Interest 2%	8/26/18	862.88		
E.						THICGLEDC 34	0/20/10	002.00		

(TAXPAYER COPY)

EXPLANATION OF NOTICE. CONTINUED TAXPAYER ID: NOTICE NUMBER: 109176259

TOTAL DUE AS OF: 07/07/2018. TOTAL AMOUNT OF 50.00

TOT

BALANCE DUE

2

50.00 程度 医肾管

PLEASE RETURN THE NOTICE OF TAX DUE STUB WITH PAYMENT TO: DEPARTMENT OF REVENUE, FRANKFORT, KENTUCKY

ONLINE PAYMENT OPTIONS ARE AVAILABLE. THE DEPARTMENT OF REVENUE ACCEPTS PAYMENTS BY CREDIT CARD OR ELECTRONIC CHECK. PAYMENT RULES VARY BY TAX TYPE. YOU MAY GET MORE DETAILS AND MAKE PAYMENTS AT HTTPS://EPAYMENT.KY.GOV/EPAY.

TO PAY BY PHONE, PLEASE CALL (502) 564-4921, EXT. 5357. ACCEPTED ARE VISA, MASTERCARD, DISCOVER OR AMEX. 2.75% CONVENIENCE FEE FOR CREDIT CARD PAYMENT OR 1.5% CONVENIENCE FEE FOR DEBIT CARD PAYMENT. NO CHARGE FOR ELECTRONIC CHECKS.

IMPORTANT REMINDER: INCLUDE YOUR TAXPAYER IDENTIFICATION NUMBER, TYPE OF TAX, AND TAX PERIOD ON ANY PAYMENT OR LETTER SENT TO THE DEPARTMENT OF REVENUE. THIS ENABLES THE DEPARTMENT OF REVENUE TO CORRECTLY CREDIT YOUR ACCOUNT FOR THE TAX PERIOD AND TYPE TAX FOR WHICH YOU INTENDED.

REPLY TO: JUDY 0207

DEPARTMENT OF REVENUE STATION NUMBER 62 501 HIGH STREET P 0 BOX 181

FRANKFORT KY 40602

TEL: (502) 564-9280 FAX: (502) 564-3393

OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

#### NOTICE REQUIREMENT FOR INTERNET POSTING

IF YOUR TAX LIABILITY REMAINS UNPAID FOR MORE THAN 90 DAYS AFTER THE DATE OF THIS ORIGINAL NOTICE, THE DEPARTMENT OF REVENUE MAY POST YOUR NAME AND THIS LIABILITY FOR PUBLIC INSPECTION, INCLUDING POSTINGS IN YOUR LOCAL NEWSPAPER AND/OR ON THE INTERNET. HOWEVER, IF YOU NOTIFY THE DEPARTMENT IN WRITING DURING THIS PERIOD OF ANY OF THE FOLLOWING, THE DEPARTMENT MUST EXCLUDE YOUR NAME FROM ANY PUBLIC POSTING:

- 1. YOU HAVE AN APPEAL PENDING OR INTEND TO FILE AN APPEAL PURSUANT TO KRS 131.110 ET SEQ. WITH RESPECT TO THIS LIABILITY:
- 2. YOU ARE CURRENTLY PAYING THIS TAX LIABILITY THROUGH A VALID PAY AGREEMENT:
- 3. THE DEPARTMENT IS REVIEWING OR ADJUSTING THIS TAX LIABILITY;
- 4. YOU ARE IN BANKRUPTCY AND THE AUTOMATIC STAY IS STILL IN EFFECT.

ADDITIONALLY, A TAXPAYER'S NAME WILL BE EXCLUDED OR REMOVED FROM ANY PUBLIC POSTING IN THE EVENT THE DEPARTMENT IS NOTIFIED IN WRITING THAT THE TAXPAYER IS DECEASED.

PLEASE PROVIDE WRITTEN BASIS FOR EXCLUSION TO THE DIVISION OF COLLECTIONS, P.O. BOX 491, FRANKFORT, KY 40602, OR E-MAIL IT TO KRC. WEBRESPONSENOTICEOFT AXDUE@KY.GOV.

EXPLANATION OF NOTICE, CONTINUED TAXPAYER ID: NOTICE NUMBER: 108979232

	TOTAL SOUTHERN THE PROPERTY OF
TOTAL DUE TOTAL AMOUNT (17.194)	BALANCE OUE
TOTAL DUE	
。	94.02
在现在,1967年1967年1967年1967年1967年1967年1967年1967年	THE PROPERTY OF THE PARTY OF TH

ANY PROTEST MUST BE IN WRITING, STATING REASONS, AND BE FILED WITH THE DEPARTMENT OF REVENUE AT THE ADDRESS LISTED ON YOUR NOTICE OF ASSESSMENT BY 02/05/2018 OR YOU WILL LOSE ALL APPEAL RIGHTS.

ONLINE PAYMENT OPTIONS ARE AVAILABLE. THE DEPARTMENT OF REVENUE ACCEPTS PAYMENTS BY CREDIT CARD OR ELECTRONIC CHECK. PAYMENT RULES VARY BY TAX TYPE. YOU MAY GET MORE DETAILS AND MAKE PAYMENTS AT HTTPS://EPAYMENT.KY.GOV/EPAY.

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REPLY TO: NAGARAJAN 3990

DEPARTMENT OF REVENUE STATION NUMBER 32 501 HIGH STREET

**STA 32 FRANKFORT** 

KY 40601-2103

TEL: (502) 564-7190 EXTENSION 7104 FAX: (502) 564-8192

OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

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#### COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE FRANKFORT, KY 40619

NOTICE DATE 06/22/2018 PERIOD 07/01/2018-06/30/2019 CASE 000048000033 TAX
PUBLIC SERVICE COMMISSION
ASSESSMENT

NOTICE # 109176259 RETURN DUE 07/31/2018 TAXPAYER-ID

TAXPAYER NAME NIXUTIL SANITATION

## EXPLANATION OF NOTICE

ANNUAL PUBLIC SERVICE COMMISSION ASSESSMENT FOR THE ABOVE PERIOD.

MESSAGES:

PENALTIES PROVIDED PER KRS 278.990(3) INCLUDE \$1,000, PLUS \$25 PER DAY FOR EACH DAY THE ASSESSMENT REMAINS UNPAID. KRS 131.440(1)(A) IMPOSES A COST OF COLLECTION FEE FOR TWENTY-FIVE PERCENT (25%) ON ALL ASSESSMENTS WHICH ARE OR BECOME DUE AND OWING TO THE DEPARTMENT. IF THE AMOUNT DUE IS NOT. PAID BY JULY 31, 2004, THESE PENALTIES AND FEES MAY BE ADDED TO THIS ASSESSMENT AND REFERRED FOR ENFORCED

COLLECTION ACTION.

QUESTIONS CONCERNING THIS ASSESSMENT MAY BE DIRECTED TO THE PUBLIC SERVICE COMMISSION, 211 SOWER BOULEVARD, PO BOX 615, FRANKFORT, KENTUCKY 40602, TELEPHONE NUMBER (502) 564-3940. KRS 278.130 PROVIDES FOR THE ANNUAL ASSESSMENT OF PUBLIC SERVICE COMPANIES.

9/30/18 6/30/20

GROSS INTRASTATE RECEIPTS

TAX LIABILITY

TOTAL LIABILITY

21,705.50
TAX LIABILITY
50.00
TOTAL LIABILITY
50.00

<>< EXPLANATION OF NOTICE CONTINUED ON NEXT PAGE >>>>

DETACH VOUCHER AND RETURN WITH PAYMENT. MAKE CHECK PAYABLE TO KENTUCKY STATE TREASURER.

COMMONWEALTH OF KENTUCKY DEPARTMENT OF REVENUE FRANKFORT, KY 40619

NOTICE DATE 12/22/2017

01/01/2017-12/31/2017

X69907652035

PUBLIC SERVICE COMPANY

NOTICE # 108979232 RETURN VAL# 000007470

TAXPAYER-ID

TAXPAYER NAME NIXUTL SANITATION ASSOC INC

FOR QUESTIONS REGARDING THIS NOTICE, PLEASE CONTACT:

NAGARAJAN 3990 DEPARTMENT OF REVENUE STATION NUMBER 32 501 HIGH STREET STA 32 FRANKFORT

KY 40501-2103

TEL: (502) 564-7190 EXTENSION 7104 FAX: (502) 564-8192

OFFICE HOURS: 8:00 A.M. TO 5:00 P.M. EASTERN TIME

#### EXPLANATION OF NOTICE

THE PUBLIC SERVICE COMPANY RETURN WAS RECEIVED AND THE PROPERTY TAX DUE HAS BEEN CALCULATED. LOCAL PROPERTY TAXES WILL BE BILLED SEPARATELY BY LOCAL JURISDICTIONS. KRS 136.180(2)

TAX LIABILITY

TOTAL LIABILITY

<<< EXPLANATION OF NOTICE CONTINUED ON NEXT PAGE >>>>

DETACH VOUCHER AND RETURN WITH PAYMENT. MAKE CHECK PAYABLE TO KENTUCKY STATE TREASURER.

Due March 2018

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 Resports

Invoice No.
Phone Numbers
Home

N	ar	n	e
	aı		v

**Nixutil Sanitation Assocaition WWTP** 

**Amount** 

Date

Services

OctDec. Quarterly service charge for operation at the Treatmen	Plant	t
--	-------	---

\$930.00

Flow measurement & Field Lab Fees

\$225.00

Sludge Hauled

\$750.00

**Chlorine Tablets** 

\$650.00

De-clor Tablets 45 lbs.

\$300.00

Service Blower & Belts

\$150.00

Sampler rental & sampling

\$35.00

Installed motor

Labor only

\$105.00

Over payed

(\$60.00)

Total

\$3,085.00

1085/5/18 1085/5/187 Cleth Jel-Jeb-Oue 1085.00 March **Crone Environmental Services** Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017

nvoice No.
Phone Numbers
Home
Cell

Name	Nixutil Sanitation Assocaition WWTP		Amount
Date	Services		
Apr-June	Quarterly service charge for operation at the Treatment Plant		\$930.00
	Flow measurement & Field Lab Fees		\$225.00
	Sludge Hauled		\$1,000.00
	Chlorine Tablets		\$650.00
	De-clor Tablets 45 lbs.		\$325.00
	Service Blower & Belts		\$150.00
	Sampler rental & sampling		\$35.00
6/6/2018	Repaired skimmer	Labor	\$70.00
6/13/2018	2 New belts		\$43.00
	Sextue	Total	\$3,428.00

July 1000 1428

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 WWTP

Invoice No.
Phone Numbers
Home
Cell

Amount

Name

**Nixutil Sanitation Assocaition WWTP** 

Date

Services

JanMar. Quart	erly service charge	for operation at the	Treatment Plant	
---------------	---------------------	----------------------	-----------------	--

\$930.00

Flow measurement & Field Lab Fees

\$225.00

Sludge Hauled

\$750.00

**Chlorine Tablets** 

\$650.00

De-clor Tablets 45 lbs.

\$300.00

Service Blower & Belts

\$150.00

Sampler rental & sampling

\$35.00

1000 - april 64/18 1000 hay 10400

Total

\$3,040.00

Dufil18

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 Invoice No.
Phone Numbers
Home
Cell

me	Nixutil Sanitation Ass	ocaition WWTP	Amount
te	Services		
ly-Sept	Quarterly service cha	rge for operation at the Treatment Plant	\$930.00
	Flow measurement &	Field Lab Fees	\$225.00
	Sludge Hauled		\$750.00
	Chlorine Tablets		\$650.00
	De-clor Tablets	45 lbs.	\$325.00
	Service Blower & Belt	ts ,	\$150.00
	Sampler rental & sam	pling	\$35.00
	2 New Belts	Si .	\$33.00
	te	te Services  ly-Sept Quarterly service cha Flow measurement & Sludge Hauled Chlorine Tablets De-clor Tablets Service Blower & Belt Sampler rental & sam	ly-Sept Quarterly service charge for operation at the Treatment Plant Flow measurement & Field Lab Fees Sludge Hauled Chlorine Tablets De-clor Tablets 45 lbs. Service Blower & Belts Sampler rental & sampling

Total \$3,098.00

Od 1,000 Och 100 Per

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 Invoice No.
Phone Numbers
Home

Name

Nixutil Sanitation Assocaition WWTP

**Amount** 

Date

Services

## **Public Service Commission Mandated Work**

11/16/2018 Installed 2 new unions/valves/elbows & 4 nipples	Parts & Labor	\$158.17
11/16/2018 Installed 2 new Drops & 4 Diffuers	Parts & Labor	\$143.68
11/21/2018 Installed 1 new Drops & 2 Diffuers	Parts & Labor	\$71.84
11/21/2018 Installed 5 new boards around fence line	Parts & Labor	\$220.52
11/21/2018 Repaired holding tank air lift pump	Labor	\$80.00
11/22/2018 Installed new air line on air lift pump	Labor	\$40.00

674,21 12/1/8/9

Total \$674.21

31 Dec 1 18

Crone Environmental Services Carl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017 Invoice No.
Phone Numbers
Home
Cell

Name

Nixutil Sanitation Assocaition WWTP

**Amount** 

Date

Services

11/16/2018 Removed old Blower

Labor \$40.00

11/17/2018 New Roots ur-33 Blower

Part \$1,704.00

11/17/2018 Installed new Blower pulley & belt

Labor \$160.00

11/17/2018 Replaced rubber boot from blower to air line

Parts & Labor \$67.23

11/22/2018 New US 5 HP Motor

Part \$609.40

11/22/2018 Removed old Motor and Installed new 5 HP Motor

Labor \$160.00

ch 219 12-1-10.63 2740.63

Total \$2,740.63

Od 1990 3414.84

2740.63

one Environmental Services Jarl W. Crone 808 Niewahner Dr. Villa Hills Ky. 41017

Invoice No. **Phone Numbers** Home Cell

Name	Nixutil Sanitation Assocaition WWTP					
Date	Services					
OctDec.	Quarterly service charge for operate	ion at the Treatment Plant		\$930.00		
	Flow measurement & Field Lab Fe	es 🦠		\$225.00		
	Sludge Hauled			\$750.00		
	Chlorine Tablets	25		\$650.00		
	De-clor Tablets 45 lbs.		40	\$300.00		
	Service Blower & Belts			\$150.00		
	Sampler rental & sampling	•		\$35.00		
10/12/2018	Installed new Chlorine pump		Parts& Labor	\$388.00		
11/28/2018	Re- manufactored air lift pump to he	olding tank	Parts& Labor	\$110.00		
12/15/2018	Installed new blower filter & housing	g assembly on new Blower	Parts	\$175.00		

Od 1,000.00 12/27/18
for Jan - 7 - March

Pd 1713,00 ck # 235 3/2/2019



PACE Analytical Services, LLC 25 Holiday Drive

**INVOICE** 

Invoice No: 1803902

04/24/18

4/24/2018

Englewood, OH 45322 TEL: (937) 832-8242

INV DATE:

Print DATE:

Remit To:

PACE Analytical Services, LLC

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

**Nixutil Sanitation** 

2048 Lincoln Drive Independence, KY 41051

Client Code:

Invoice To:

52-500148

Attn:

Donna Brautigan

Phone:

(859) 356-2326

Work Order:

18D1002

Order Name:

Quarterly KPDES

PO Number:

Date Received

04/16/18

Item	Matrix	Quantity	Quoted	Extended Cost
TSS [6 day]	Water	1	\$15.50	\$15.50
NKY_SampHand [6 day]	Water	1	\$25.00	\$25.00
NKY_BACT_ECOLI_W_18 [6 day]	Water	1	\$42.00	\$42.00
NH3 [6 day]	Water	1	\$26.50	\$26.50
CBOD [6 day]	Water	1	\$26.50	\$26.50

**INVOICE Total:** 

\$135.50

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS. PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE ADVICE.



PACE Analytical Services, LLC 25 Holiday Drive

Englewood, OH 45322 TEL: (937) 832-8242

Remit To:

PACE Analytical Services, LLC

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

INVOICE

INV DATE: Print DATE: 10/25/18

12/19/2018

Invoice No: 1811496

Invoice To:

**Nixutil Sanitation** 

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn:

Donna Brautigan

Phone:

(859) 356-2326

Work Order:

18J1353

Order Name:

Quarterly KPDES

PO Number:

**Date Received** 

10/18/18

Item	Matrix	Quantity	Unit Price	Quoted	Extended Cost
TSS [6 day]	Water	1	\$30.00	\$15.50	\$15.50
NKY_SampHand [6 day]	Water	1	\$0.00	\$25.00	\$25.00
NKY_BACT_ECOLI_W_18 [6 day]	Water	1	\$95.00	\$42.00	\$42.00
NH3 [6 day]	Water	1	\$30.00	\$26.50	\$26.50
. CBOD [6 day]	Water	1	\$80.00	\$26.50	\$26.50

**INVOICE Total:** 

\$135.50

All invoices are due and payable net 30 days from receipt.

But a/18 ch 224 5.50

Page 1 of 1



PACE Analytical Services, LLC 25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

INVOICE

**Invoice No: 1808153** 

08/06/18

8/6/2018

Remit To:

PACE Analytical Services, LLC

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

**Nixutil Sanitation** 

2048 Lincoln Drive

Independence, KY 41051

INV DATE:

Print DATE:

Client Code:	52-500148			Q	d 118
Attn: Phone:	Donna Brautigan (859) 356-2326				8/10/18
Work Order:	18G1974		Order Name:	Quarterly KPDES	1206 250
PO Number:			Date Received	07/31/18	135.00
Item		Matrix	Quantity	Quoted	Extended Cost
TSS [6 day]		Water	I	\$15.50	\$15.50
TSS [6 day] NKY_SampHa	and [6 day]	Water Water	1 1	\$15.50 \$25.00	\$15.50 \$25.00
NKY_SampHa	and [6 day] ECOLI_W_18 [6 day]		1 1 1		
NKY_SampHa		Water	1 1 1	\$25.00	\$25.00

**INVOICE Total:** 

\$135.50

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS, PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE ADVICE.



PACE Analytical Services, LLC 25 Holiday Drive Englewood, OH 45322

**INVOICE** 

Invoice No: 1801676

02/27/18

4/16/2018

TEL: (937) 832-8242

INV DATE:

Print DATE:

Remit To:

PACE Analytical Services, LLC

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Invoice To:

**Nixutil Sanitation** 

2048 Lincoln Drive

Independence, KY 41051

Client Code:

52-500148

Attn: Phone: Donna Brautigan (859) 356-2326

Work Order:

18B1119

Order Name:

Quarterly KPDES

PO Number:

Date Received

02/20/18

Item	Matrix	Quantity	Unit Price	Quoted	Extended Cost
CBOD [6 day]	Water	I	\$80.00	\$26.50	\$26.50
				y*	<del></del>

**INVOICE Total:** 

\$26.50

All invoices are due and payable net 30 days from receipt.

4/18/18/22 26.50

Joid 16/18



PACE Analytical Services, LLC

INVOICE

Invoice No: 1801073

02/07/18

2/7/2018

25 Holiday Drive Englewood, OH 45322 TEL: (937) 832-8242

INV DATE:

Print DATE:

Remit To:

PACE Analytical Services, LLC

PO Box 684056

Chicago, IL 60695-4056 TEL: (937) 832-8242

Nixutil Sanitation

2048 Lincoln Drive

Independence, KY 41051

Client Code:

Invoice To:

52-500148

Attn: Phone: Donna Brautigan (859) 356-2326

Work Order:

18A1608

Order Name:

Quarterly KPDES

PO Number:

Date Received

01/30/18

Item	Matrix	Quantity	Quoted	Extended Cost
TSS [6 day]	Water	1	\$15.50	\$15.50
NKY_SampHand [6 day]	Water	1	\$25.00	\$25.00
NKY_BACT_ECOLI_W_18 [6 day]	Water	1	\$42.00	\$42.00
NH3 [6 day]	Water	1	\$26.50	\$26.50
CBOD [6 day]	Water	1	\$0.00	\$0.00

**INVOICE Total:** 

\$109.00

1.5% MONTHLY FINANCE CHARGE ASSESSED AFTER 30 DAYS. PLEASE REFERENCE INVOICE NUMBER ON ALL REMITTANCE ADVICE.



Monday, August 6, 2018 Analytical Results

Donna Brautigan
Nixutil Sanitation
2048 Lincoln Drive
Independence, KY 41051

TEL: (859) 356-2326

FAX

**RE: Quarterly KPDES** 

Work Order: 18G1974

PACE Analytical received 2 sample(s) on 7/31/2018 for the analyses presented in the following report.

PACE Analytical attests that all analytical methods were performed using acceptable methods, and that the QA/QC procedures stipulated in these methods were followed. All test results meet the requirements of NELAC except where narrated herein. This report shall not be reproduced except in full. All samples are reported on a dry-weight basis unless otherwise stated.

If you have any questions regarding the test results, please feel free to call me at (937) 832-8242.

Respectfully submitted,

**Antoinette Marshall For Alicia Barnes** 

**Project Manager** 

25 Holiday Drive

Englewood, Ohio 45322

1.937.832.8242

1.937.832.2868 Fax

Certifications:

NELAP/NELAC - #04130

VAP - #CL0032

OEPA DW - #872

KDEP WW - #98039

931 Dudley Road

Edgewood, Kentucky 41017 \*

1.859.341.9989

1.937.832.2868 Fax

Certifications:

KDEP WW-#00053

KDEP DW-#00053

## **PACE Analytical**

Date:

8/6/2018

CLIENT: Project: Nixutil Sanitation Quarterly KPDES Lab Order:

18G1974

## **Work Order Sample Summary**

\*\*The results of analyses performed on the following samples submitted to Pace Analytical Dayton are found in this report .\*\*

Field Sample ID	Lab ID	Matrix	Method Reference	Subcontract Lab	
 Nixutil Sanitation - Comp.	18G1974-01	Waste Water	EPA 350.1	0	
			EPA 405.1/SM 5210		
			SM 2540D		
Nixutil Sanitation - Grab	18G1974-02	Waste Water	Colilert 18 SM 9223-B		

**PACE Analytical** 

Date:

8/6/2018

CLIENT:

**Nixutil Sanitation** 

Project:

Quarterly KPDES

Lab Order:

18G1974

Lab ID:

18G1974-01

Client Sample ID:

Nixutil Sanitation - Comp.

Collection Date: 7/31/2018 9:45:00AM

Matrix: Waste Water

Analysis	Result	PQL	Qual	Units	Dilution	Batch	Date Analyzed
CBOD	EPA	405.1/SM 52	10			Analyst:	CĻM
Carbonaceous Biological Oxygen Demand	BDL	2.00		mg/L	ı	1831155	8/1/2018 10:15:00AM
NH3	EPA 350.1					Analyst:	JJH
Ammonia	0.200	0.200		mg/L	t	1831371	8/3/2018 3:45:00PM
TSS	SM	2540D				Analyst:	CDG
Suspended Solids (Residue, Non-Filterable)	BDL	5.00		mg/L	1	1831191	8/2/2018 2:57:50PM

Lab ID:

18G1974-02

Client Sample ID:

Nixutil Sanitation - Grab

Collection Date: 7/31/2018 9:40:00AM

Matrix: Waste Water

Analysis	Result	PQL	Qual	Units	Dilution	Batch	Date Analyzed
NKY_BACT_ECOLI_W_18	Col	ilert 18 SM 92	223-B			Analys	t: NAG
E. coli	11.0	1.00		MPN/100	1	1831203	7/31/2018 4:51:00PM
				mL			

## **PACE Analytical**

Date:

8/6/2018

CLIENT: Project: Nixutil Sanitation Quarterly KPDES

Lab Order:

18G1974

**Notes and Definitions** 

# CHAIN-OF-CUSTODY / Analytical Request Document The Chain-of-Custody is a LEGAL DOCUMENT, All relevant fields must be completed accurately.

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	INDEPENDENCE, KY 41051						****	_	Company Name: NIXUTIL/ BEL-AIRE Address: same					-	NP	_	100	_						1000					
mail To:	dbrautigan@zoomtown.com	Purchase Orde	er No.:		<del></del>			-	Pace C	Quote .	_;-	<u> </u>						<del></del>	-4						WAT	5-600	DRINKING	WAIER	- 1
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TEN			SAMPLE TYPE	DATE.	TIME	DATE	TIME	SAMPLE TEMP	# OF CONTAINERS	Unpreserved	S S	되	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	Methanol		CBOD	83	NH3 (250)	31						Res	Pace	Project N	o./ Lab I.	D.
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## Sample Condition Upon Receipt

Pace Analytical Client Name:	NIXUTIL/BEI-AIRE Project # 1861974
Courier: Fed x UPS USPS CACHER Tracking #:	
Custody Seal on cooler/Box Present:  yes	☑ no Seals infact: yes no
Packing Material: Bubble Wrap Bubble	
Cooler Temperature  Login IR#  Login IR#  Uncor CF Final	Type of Ice: Wet Blue None    Samples on ice, cooling process has begun    Date and initials of person examining contents:
Chain of Custody Present:	MYes ONO ONA 1.
Chain of Custody Filed Cut:	DAYES UNO UNIA 2.
Chain of Custody Falinguished:	ØYes □No □N/A 3.
Sampler Name & Spriature on COC:	(AYes DNo DN/A 4
Samples Arrived within Hold Time:	Myes ON ONA 5.
Short Hold Time Analysis (<72hr):	Myes DNO DNA B. CSOD, E.COU
Rush Turn Around Time Requested:	CIYES DANG CINVA 7.
Sufficient Volume:	DAYES CINO CINVA 8.
Correct Containers Used:	TYPES CINO CINA 9.
-Pace Container Used:	Øyes EINO EINA
Containers Intact:	MYes DNo DNA 10.
Filtered volume received for Dissolved tests	CIYES TANO CINIA 11.
Sample Labels mater COC:	MYSS CINO CINA 12.
-Includes date/tine/tD/Analysis Matrix:	WW.
Samples checked to dechlorination:	DYES TANO DINIA 14.
Headspace In VOA Tals (>6mm):	CIYES CINO UNIA 15.
Trip Blank Present:	CIYES CINO CINVA 16.
Trip Blank Custody Seals Present	CIYOS CINO CINYA
Pace Trip Blank Lot - (if purchased):	

XCIQAQCIForms & LabelsIF-DAY-C-005-REV01 -: SCUR (NKY)

Online Banking Acct.#:

Prior Balance \$35.75

**Payments** \$-35.75

Bal.Forward \$0.00

**Adjustments** \$0.00

**New Charges** \$35.75

**Total Amount Due** \$35.75

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1723

Mailing Address:

PO Box 18640

Erlanger, KY 41018-0640

**Billing Date** 04/27/2018

Payment Due ON or BEFORE Payment Due after Due Date

05/30/2018

\$39.03

**Meter Reading Data** 

Meter **Previous** Current Read **Previous** Current Reading Reading Size **Read Date Read Date** Usage Units Meter # Days Type 20072621 2018-01-15 2018-04-13 Regular 0 **HCF** Total Usage Billed: 0 HCF

Service Period: **Current Charges Detail** 01/15/2018 - 04/13/2018 Previous Balance \$35.75 Payment - Thank You \$-35.75 Current Charges Detail: Fixed Service Charge \$32.80 Sales Taxes - Kentucky \$1.97 School Taxes - Kenton County \$0.98 Current Charges for 11961 CATALINA DR \$35.75

Monday - Friday 8:00 AM - 5:00 PM

Any Questions?

\*\*2018 Northern Kentucky Water District annual water quality report for the calendar year 2017 is available. This report

contains important information about your drinking water.

Please call us at 859.578.9898

Please go to www.nkywater.org/ccr.pdf to view your 2017 annual water quality report or to request a paper copy call (859) 441-0482.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

Usage History

Read Date	Days	Usage	
2018-04-13	88	0 HCF	
2018-01-15	90	0 HCF	
2017-10-17	96	0 HCF	
2017-07-13	91	0 HCF	
2017-04-13	90	0 HCF	
2017-01-13	91	1 HCF	

Amount Due ON or BEFORE 05/30/2018..... \$35.75



Service Address 11961 CATALINA DR Customer Number

**Account Number** 

Online Banking Acct.#:

Prior Balance \$35.75

**Payments** \$-35.75

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** \$35.75

**Total Amount Due** \$35.75

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address:

PO Box 18640

Erlanger, KY 41018-0640

**Billing Date** 01/30/2018

Payment Due ON or BEFORE Payment Due after Due Date

03/05/2018

\$39.03

Meter Reading Data

Meter #	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20072621		2017-10-17	2018-01-15	90	Regular	0	0	0	HCF
						Total Usag	e Billed:	0	HCF

Current Charges Detail	Service Period:	10/17/2017 - 01/15/2018	
Previous Balance			\$35.75
Payment - Thank You			\$-35.75
Current Charges Detail:			
Fixed Service Charge		3	\$32.80
Sales Taxes - Kentucky			\$1.97
School Taxes - Kenton Cour	nty		\$0.98
Current Charges for 11961	CATALINA DR		\$35.75

Any Questions?

Please call us at 859.578.9898 Monday - Friday

8:00 AM - 5:00 PM

"How to pay your bill: OVER THE PHONE via our 24/7 automated system ONLINE-NO REGISTRATION NEEDED thru our website at www.nkywater.org, click on the VIEW/PAY YOUR BILL option.

"Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

"DEPOSITS: Delinquent accounts will be subject to a deposit.

**Usage History** 

Read Date	Days	Usage	
2018-01-15	90	0 HCF	
2017-10-17	96	0 HCF	
2017-07-13	91	0 HCF	
2017-04-13	90	0 HCF	
2017-01-13	91	1 HCF	
2016-10-14	92	0 HCF	

Amount Due ON or BEFORE 03/05/2018...... \$35.75



**Service Address** 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#:

Prior Balance **Payments** \$35.75 \$-35.75

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** \$35.75

**Total Amount Due** \$35.75

Office: 2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address: PO Box 18640 Erlanger, KY 41018-0640

Any Questions? Please call us at 859.578.9898 Monday - Friday 8:00 AM - 5:00 PM

\*\*2018 Northern Kentucky Water District annual water quality report for the calendar year 2017 is available. This report contains important information about your drinking water.

\*\*Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

\*\*DEPOSITS: Delinquent accounts will be subject to a deposit.

**Billing Date** 

Payment Due ON or BEFORE Payment Due after Due Date

10/29/2018

11/30/2018

\$39.03

**Meter Reading Data** 

Meter#	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20072621		2018-07-11	2018-10-15	96	Regular	0	0	0	HCF
						Total Hoos	o Dillade	^	HCE

Pd-1-1213

Current Charges Detail	Service Period:	07/11/2018 - 10/15/2018	 
Previous Balance			\$35.75
Payment - Thank You			\$-35.75
Current Charges Detail:			
Fixed Service Charge			\$32.80
Sales Taxes - Kentucky	!		\$1.97
School Taxes - Kenton	County		\$0.98
Current Charges for 11	961 CATALINA DR		\$35.75

**Usage History** 

Head Date	Days	Usage	
2018-10-15	96	0 HCF	
2018-07-11	89	0 HCF	
2018-04-13	88	0 HCF	
2018-01-15	90	0 HCF	
2017-10-17	96	0 HCF	
2017-07-13	91	0 HCF	

Amount Due ON or BEFORE 11/30/2018...... \$35.75



Service Address 11961 CATALINA DR **Customer Number** 

**Account Number** 

Online Banking Acct.#:

Prior Balance \$35.75

**Payments** \$-35.75

Bal.Forward \$0.00

Adjustments \$0.00

**New Charges** 

**Total Amount Due** 

Office:

2835 Cresent Springs Rd Erlanger, KY 41018-1324

Mailing Address:

PO Box 18640

Erlanger, KY 41018-0640

Any Questions?

Please call us at 859.578.9898 Monday - Friday

8:00 AM - 5:00 PM

\*\*2018 Northern Kentucky Water District annual water quality report for the calendar year 2017 is available. This report contains important information about your drinking water.

\*\*Unused prescription medications are bad for the environment and for our teens. Do not flush unused medication down drains. Use area take-back programs to keep our waters clean and prevent teen drug abuse.

"DEPOSITS: Delinquent accounts will be subject to a deposit.

**Billing Date** 

Payment Due ON or BEFORE Payment Due after Due Date

\$35.75

\$35.75

07/27/2018

08/28/2018

\$39.03

Meter Reading Data

Meter #	Meter Size	Previous Read Date	Current Read Date	Days	Read Type	Previous Reading	Current Reading	Usage	Units
20072621		2018-04-13	2018-07-11	89	Regular	0	0	0	HCF
						Total Usag	e Billed:	0	HCF

Current Charges Detail	Service Period:	04/13/2018 - 07/11/2018	
Previous Balance			\$35.75
Payment - Thank You			\$-35.75
Current Charges Detail:			
Fixed Service Charge			\$32.80
Sales Taxes - Kentucky	3.		\$1.97
School Taxes - Kenton Cour	nty		\$0.98
Current Charges for 11961	CATALINA DR		\$35.75

**Usage History** 

Read Date	Days	Usage		
2018-07-11	89	0 HCF		
2018-04-13	88	0 HCF		
2018-01-15	90	0 HCF		
2017-10-17	96	0 HCF		
2017-07-13	91	0 HCF		
2017-04-13	90	0 HCF		

Amount Due ON or BEFORE 08/28/2018...... \$35.75



Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

A Touchstone Energy	Cooperative
9.	

ACCOUNT NUMBER		ACCOUNT NA	ME			SERVI	CE ADDRESS .		METER NU	MBER	BILL DATE
	NIXUTIL S	OITATION	ASSOC IN	С	11968	CATALI	NA DRIVE -	SEWER	17541	14	04/27/18
SERVICE PERI FROM	D TO	NO. DAYS	PREVIOUS	TER RE		CODE	METER MULTIPLIER	BILLE DEMA		the state of the s	CHARGES
03/27/18 04 0.005250 ENVIRONME LOCAL SCH STATE SALE TOTAL CURREN PREVIOUS AMO THANK YOU FOI TOTAL AMOUNT	ENTAL SUR OOL TAX- : ES TAX- 6% T BILL DUE UNT DUE R YOUR PA	3% E 05/17/18	2.260%	578		R 2 7. 5/4/ CK	1 04 48 5/95		2604 2604		243.42 13.67 5.81 7.89 16.25 287.04 296.62 -296.62 287.04
NEXT METER READING DA	TE 05/25/	18 SERVI	CE LOCATION:		7141	1137112	TELE	PHONE	(859) 363-5263	3	i.
	to a minimum part to be a tight	TOTAL KWH	Dist. of A Sandy Sander Sandy	This a plant or the	CLE		TOTA	L ACCO	UNT BALAN	CE	\$287.04
CURRENT, BILLING PERIOD!	29 32	2604 2838	90 89		19	CURREN	T BILL DUE	05/17/18	BILL IS DELI	VQUENT A	FTER DÛE DATE
SAME PERIOD LAST YEAR	30	2523	84	3	52		Who was a constant of the sale		DUE DATE PA	the many services	\$300.18
the same and a same and a same and a same and	Use Over The La				f.				<u> </u>		

JASONDJFMA

3,289 2,193 Spring season often brings events of inclement weather and the potential for power outages due to storms - STAY AWAY from downed power lines and report outages to 800.372.7612!

## IMPORTANT INFORMATION

Due date is for CURRENT month's bill only.

Any account with a previous amount due is subject to disconnection.

Please allow ample time for delivery before the due date when mailing your payment. Write account number on your check.

Visit us at: www.owenelectric.com
To view/pay your bill and see our other services.

ASK ABOUT THESE SERVICES & PRODUCTS
Automatic Bank / Credit Card Bill Payment
E-Billing (Eliminates Paper Bills)



Office Hours:

8:00 a.m. - 4:30 p.m. EST

Monday - Friday

A	Touchstone	Energy*	Cooperative	XTX	
0.00					

ACCOUNT NUMBER		ACCOUNT N	NAME		SERVI	CE ADDRESS		METER NUMBER	BILL DATE
	NIXUTIL S	SANITATIO	N ASSOC IN	NC 11	968 CATALII	NA DRIVE -	SEWER	175414	05/30/18
SERVICE PE	RIOD	NO.	ME	TER READI	NG	METER	BILLED	KILOWATT	OUADOES.
FROM	то	DAYS	PREVIOUS	PRESENT	CODE	MULTIPLIER	DEMAND	HOURS	CHARGES
-0.001610 ENVIRONI LOCAL SC STATE SA TOTAL CURRE	MENTAL SUR HOOL TAX- 3 LES TAX- 6% NT BILL DUE	CHARGE 3%	57818 JUSTMENT 11.890%	60443	R	1		2625 2625	245.19 -4.23 28.65 8.09 16.66 294.36
PREVIOUS AM THANK YOU FO TOTAL AMOUN	OR YOUR PA	YMENT (S	(S)	/4/	18 de	198 19436			287.04 -287.04 294.36
NEXT METER READING	6000	2 100	ICE LOCATION		1411137112			59) 363-5263	
COMPARISONS		A CANADA STREET, ST. P. L.	AVG. KWHIDAY		50 <u>-</u> 5	TOTAL	_ ACCOU	NT BALANCE	\$294.36
CURRENT(BILLING PERIOD PREVIOUS BILLING PERIOD		2625 2604	90	619	CURREN	IT BILL DUE	06/17/18	BILL IS DELINQUE	NT AFTER DUE DATE
SAME PERIOD LAST YEAR		2581	89		52		AFTER DI	UE DATE PAY	\$307.84
Your Electri	city Use Over The La	ast 13 Months							

A S O N D J F M A M

OWEN ELECTRIC OFFERS A LEVELIZED BILLING PROGRAM AS A WAY TO EVEN OUT YOUR MONTHLY ELECTRIC USAGE. THIS PROGRAM HELPS TO SMOOTH OUT HIGH/LOW SEASONAL FLUCTATIONS IN YOUR BILLS.

## IMPORTANT INFORMATION

Due date is for CURRENT month's bill only.

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Please allow ample time for delivery before the due date when mailing your payment.

Write account number on your check.

Visit us at: www.owenelectric.com
To view/pay your bill and see our other services.

ASK ABOUT THESE SERVICES & PRODUCTS
Automatic Bank / Credit Card Bill Payment
E-Billing (Eliminates Paper Bills)



Office Hours: 8:00 a.m. - 4:30 p.m. EST

Monday - Friday

A Touchstone Energy Cooperative

ACCOUNT NUMBER		ACCOUNT NA	ME			SERVIC	E ADDRESS		METER NUMBER		ILL DATE
	NIXUTIL S	ANITATION	ASSOC IN	С	11968	CATALIN	A DRIVE -	SEWER	175414	0	9/27/18
SERVICE PER	RIOD TO	NO. DAYS	PREVIOUS	TER RE	2 11 4 12	CODE	METER: MULTIPLIER	BILLED DEMAN		СН	ARGES
-0.006750 ENVIRONM LOCAL SCI STATE SAI TOTAL CURRE PREVIOUS AMOUNTOTAL AMOUN	MENTAL SUR HOOL TAX- 6% NT BILL DUE OUNT DUE OR YOUR PA IT DUE	3% E 10/15/18 SYMENT (S)	8.960%	7093	()	R Charles	1 8 42 2 40.42		2296 2296		217.59 15.50 18.11 6.61 13.61 240.42 311.03 -311.03 240.42
EXT METER READING C	Marie .	CEASURE CHASE	ELOCATION			1137112	11 30 10		859) 363-5263		
COMPARISONS	DAYS SERVICE		AVG. KWHIDAY.				TOTAL	- ACCOL	INT BALANCE		\$240.42
IRRENT: BILLING PERIOD LEVIOUS BILLING PERIOD	29	2296.	79 88	RATE:		CURREN	T BILL DUE	10/15/18	BILL IS DELINQUI	NT AFTER	DUE DAT
ME PERIOD LAST YEAR	32	2787	87	3	52	Ann 14 45 1 1 1 1 1 1 1	The second secon		UE DATE PAY	or wall die Alemania Anne	\$251.43
and the same of th	ity Use Over The L		<u> </u>	,							
3,289				BU	GET I	BETTER /	TINOM DNA	OR YOUR	R DAILY ENERGY	USE WITH	OUR

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ACCOUNT NUMBER		ACCOUNT N	AME		* * *	SERVIO	E ADDRESS			METER NUMBER		BILL DATE
	NIXUTIL:	SANITATIO	N ASSOC IN	C	11968	CATALIN	A DRIVE	- SEWE	R	175414		10/30/18
SERVICE PER	IOD TO	NO. DAYS.	MET PREVIOUS :	ER RI	EADING SENT	CODE	METER 'MULTIPLIER		LED IAND	KILOWATT HOURS		CHARGES
09/25/18 -0.006030 ENVIRONM LOCAL SCH STATE SAL TOTAL CURREI PREVIOUS AMO THANK YOU FO	ENTAL SUF HOOL TAX- ES TAX- 6% NT BILL DUE DUNT DUE PR YOUR PA	3% 5 E 11/17/18	10.530%	737	713	R	1		, and a second	2774 2774		257.68 -16.73 25.37 7.99 16.46 290.77 240.42 -240.42 290.77
NEXT METER READING D	ATE 11/28/	18 SERVI	CE LOCATION		. 7141	1137112	, TĒŬ	ĚPHONĚ	(859)	363-5263		<del></del>
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG, KWHIDAY	C'	YCLE.		TOTA	L ACC		BALANCE		\$290.77
CURRENT BILLING PERIOD	31	2774	89		319	CURREN	I I was too I to the to		To see a	P	ENT AFT	ER DUE DATE
PREVIOUS BILLING PERIOD SAME PERIOD LAST YEAR	29 30	2296 3037	79 101	RATE 3	CLASS 52					DATE PAY		\$304.08

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BILL DATE

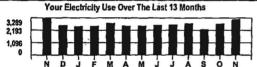
Monday - Friday

METER NUMBER

A Touchstone Energy Cooperative	www.oweneiectnc.com
ACCOUNT NUMBER ACCOUNT NAME	SERVICE ADDRESS

	NIXUTIL SA	NOITATION	ASSOC IN	C 1196	8 CATALIN	NA DRIVE - SEV	VER 175414	11/30/18	
SERVICE PER	RIOD 1	NO. DAYS	MET PREVIOUS	ER READING PRESENT	ÇODE	to be and the contract of the contract of	BILLED KILOWATT DEMAND HOURS	CHARGES	
-0.005570 ENVIRONA LOCAL SC	OUNT DUE OR YOUR PAY IT DUE	CHARGE % 12/20/18 'MENT (S)	11.570%	76892	R	1	3179 3179	291.6 -17.7 31.6 9.1 18.8 333.6 290.7 -290.7 333.6	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		C	10/12/1	3.69					

-									
NEXT METER READING D	ATE 12/26/	18 SERVI	CE LOCATION		7141	1137112	TELEPHONE	(859) 363-5263	
	DAYS SERVICE	TOTAL KWH	AVG: KWH/DAY	CY	CLE	1	OTAL ACC	OUNT BALANCE	\$333.69
CURRENT BILLING PERIOD	33	3179	96	6	19	Seminar Value and a substitution of the	W1179 3011/1981	THE RESERVE OF THE PROPERTY OF THE PARTY OF THE	NT AFTER DUE DATE
PREVIOUS BILLING PERIOD	31	2774	89	RATE	CLASS	CORKENT BILL	DUE 12/20/	IO DIEL IO DELINGUI	INT AFTER DUE DATE
SAME PERIOD LAST YEAR	32	3289	103	3	52	1	AFTER	DUE DATE PAY	\$348.97



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Main Office 8205 Highway 127 N P.O. Box 400 Owenton, Kentucky 40359-0400 800/372-7612 Fax 502/484 -2661 www.owenelectric.com

Office Hours: 8:00 a.m. - 4:30 p.m. EST Monday - Friday

ACCOUNT NUMBER		ACCOUNT NA	ME .	4 44 *		SERVI	CE ADDRESS		9 .	METER NUMBER	**	BILL DATE
	NIXUTIL S	ANITATION	ASSOC IN	C	11968	CATALI	NA DRIVE -	SEWER		175414		07/30/18
SERVICE PER	TO	NO. DAYS	PREVIOUS .	ER RE	EADING ENT	CODE	METER MULTIPLIER	BILLE DEMA	4	KILOWATT HOURS		CHARGES
-0.002250 ENVIRONM LOCAL SCI	IENTAL SUR HOOL TAX- ( LES TAX- 6% NT BILL DUE DUNT DUE DR YOUR PA	3% : 08/17/18 :YMENT (S)	10.700%	658		R J. W.	1			2711 2711		252.40 -6.10 26.35 8.18 16.85 297.68 291.71 -291.71 297.68
EXT METER READING D		\$1 4.45 et 10.00	E LOCATION .			1137112	TÉLE	PHONE	(859)	363-5263		
COMPARISONS	DAYS SERVICE						TOTA	L ACCO	UNT E	BALANCE	-	\$297.68
URRENT BILLING PERIOD	31	2711	87		319	CURREN	T BILL DUE	08/17/18	BILL	IS DELINQUE	NT AF	TER DUE DAT
REVIOUS BILLING PERIOD AME PERIOD LAST YEAR	31 29	2672 ···· 2621	90	RATE	CLASS 52	BARK BARK	lane Co. sand		1	ATE PAY	Asher	\$311.31
	ity Use Over The L				J.	L			- O - L	THE PARTY		75161

S O N D J F M A M J J

VISIT OUR MEMBER SERVICE PORTAL TO ACCESS YOUR ACCOUNT, MAKE PAYMENTS, OR ENROLL IN AUTO PAYMENT. OWENELECTRIC.COM THANK YOU.

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Monday - Friday

A Touchstone Energy* Cooperative	KIN
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ACCOUNT NUMBER	177-621.750	ACCOUNT NA	ME	44		SERVI	E ADDRESS .	<b>通过</b>		METER NUMBE	R	BILL DATE
	NIXUTIL S	SANITATIO	N ASSOC IN	С	11968	CATALIN	IA DRIVE -	SEWER		175414		12/29/17
SERVICE PER	IOD TO	NO. DAYS	PREVIOUS .		EADING SENT	CODE	METER '	BILLE		KILOWATT HOURS		CHARGES
-0.003610 ENVIRONM REFUND O LOCAL SCH	ENTAL SUR F CAPITAL ( HOOL TAX- : ES TAX- 6% NT BILL DUE DUNT DUE DR YOUR PA	CREDITS 3% 5 6 01/16/18	15.000%		214	R	1			2638 2638		246.28 -9.52 35.51 -49.81 8.17 16.83 247.46 339.68 -339.68 247.46
NEXT METER READING D	ATE 01/25/	18 SERVI	CE LOCATION :		7141	1137112	TELE	PHONE (	(859)3	63-5263		
COMPARISONS	DAYS SERVICE		AVG. KWHIDAY		YCLE		TOTAL	L ACCO	UNTE	BALANCE		\$247.46
CURRENT BILLING PERIOD	30	2638	88		319	CURREN	T BILL DUE	01/16/18	BILL	IS DELINQU	IENT AF	TER DUE DAT
PREVIOUS BILLING PERIOD SAME PERIOD LAST YEAR	32 34	3289 2937	103 86	HAIE 3	CLASS 52				1 State Colon	ATE PAY	T	\$258.58
the state of the s	ty Use Over The L				1,02	<del></del>		, , , , , , , , , , , , , , , , , , ,	<u> </u>	MEIAI	ــــــــــــــــــــــــــــــــــــــ	7200.00

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A Touchstone Energy* Cooperativ	e XIX
A touchstone Energy Cooperative	E 16.31

ACCOUNT NUMBER		ACCOUNT N	ME		1134	SERVIC	E ADDRESS		METER NUM	BER	BILL DATE
	NIXUTIL S	SANITATIO	ASSOC IN	С	11968	CATALIN	A DRIVE -	SEWER	R 175414		01/29/18
SERVICE PER	IOD TO	NO. DAYS	PREVIOUS .	PRES	ADING.	CODE	METER MULTIPLIER	BILL DEM		j.	CHARGES
-0.003440 ENVIRONM LOCAL SCI	ENTAL SUR HOOL TAX- ES TAX- 6% NT BILL DUE DUNT DUE OR YOUR PA	3% 5 E 02/16/18	11.750%	497		R	1 2,99 5,130 5,120	),	2572 2572		240.74 -8.85 27.25 7.77 16.01 282.92 247.46 -247.46 282.92
NEXT METER READING D		11'	ELOCATION			1137112	3-,2,-1	PHONE	(859) 363-5263		
COMPARISONS	DAYS SERVICE		AVG: KWH/DAY	Con compt to	CLE		TOTA	L ACC	DUNT BALANC	E	\$282.92
CURRENT BILLING PERIOD	29 30	2572 2638	89 88	RATE	19 CLASS	CURRENT	BILL DUE	02/16/1	8 BILL IS DELIN	QUENT AF	TER DUE DATE
SAME PERIOD LAST YEAR	29	2531	87	3	52			AFTER	DUE DATE PA	Υ	\$295.87
Your Electric	ty Use Over The L	ast 13 Months			25045	50 500 1	·**		0741/4/4004		

BE PREPARED FOR WINTER STORMS - STAY WARM WITH AN ALTERNATE HEATING SOURCE, STAY FED WITH SEVERAL DAYS' FOOD SUPPLY AND STAY SAFE BY NOT TRAVELING DURING WINTER STORMS. PLAN AHEAD!

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A louchst	tone Energy Coopera	tive A							
ACCOUNT NUMBE	R	ACCOUNT	NAME		SERVI	CE ADDRESS		METER NUMBER	BILL DATE
	NIXUTIL	SANITATIO	ON ASSOC IN	C 1196	8 CATALII	NA DRIVE - S	EWER	175414	03/29/18
SERVICE	PERIOD TO	NO.		ER READING PRESENT	CODE	METER MULTIPLIER	BILLED DEMAND	KILOWATT HOURS	CHÂRGES >
02/23/18 -0.0001 ENVIRO	03/27/18 50 PER KWI DNMENTAL SUF		52376 DJUSTMENT 3.450%	55214	R	1		2838 2838	263.05 -0.43 9.06

LOCAL SCHOOL TAX- 3% STATE SALES TAX- 6%

TOTAL CURRENT BILL DUE 04/16/18

PREVIOUS AMOUNT DUE

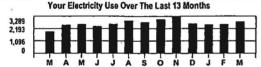
THANK YOU FOR YOUR PAYMENT (S)

TOTAL AMOUNT DUE

3 dalis 2

8.15 16.79 296.62 284.83 -284.83 296.62

NEXT METER READING D	ATE 04/25/	18 SERVI	CE LOCATION		7141	1137112 TELEPHONE	(859) 363-5263	
COMPARISONS	DAYS SERVICE	TOTAL KWH	AVG KWH/DAY/	C/	CLE	TOTAL ACC	OUNT BALANCE	\$296.62
CURRENT BILLING PERIOD	32	2838	89	6	19	CURRENT BILL DUE 04/16	40 BUT IS DELINOU	ENT ACTED DUE DATE
PREVIOUS BILLING PERIOD	29	2590	89	RATE	CLASS	المند ميسوس فلاخ كثيب المساخ سيده والمسا	بالكائنية ساست سنايطينا بالماء ومدورة	CNITATION DOE DATE
SAME PERIOD LAST YEAR	32	1938	61	3	52	AFTE	R DUE DATE PAY	\$310.20



IN ORDER FOR OEC TO PROVIDE THE BEST MEMBER SERVICE, IT IS CRITICAL CONTACT INFORMATION IS KEPT UP-TO-DATE! PLEASE CALL 800-372-7612 OR ACCESS YOUR ACCOUNT ONLINE TO UPDATE.

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A louchstone E	nergy* Cooperat	ive A										
ACCOUNT NUMBER		ACCOUNT NA	ME			SERVIC	E ADDRESS		ME	TER NUMBER	В	LL DATE
	NIXUTIL S	ANITATION	ASSOC II	VC	11968	CATALIN	A DRIVE -	SEWER	1	175414	0	2/27/18
SERVICE PER	OD TO	NO. DAYS	MI PREVIOUS,	TER, RI	44.62.74.20.34	CÓDE	METER MULTIPLIER	BILL DEM/	The state of the s	KILOWATT HOURS	CHA	RGES
01/25/18 0 -0.001930 ENVIRONM LOCAL SCH STATE SAL TOTAL CURREN PREVIOUS AMO THANK YOU FO TOTAL AMOUN	ENTAL SUR IOOL TAX- 3 ES TAX- 6% IT BILL DUE DUNT DUE R YOUR PA	3% 03/17/18	49786 USTMENT 9.960%	523	976	Ck1 3d	3/5/1	8		2590 2590		242.25 -5.00 23.63 7.83 16.12 284.83 282.92 -282.92 284.83
EXT METER READING DA	ATE 03/27/	18 SERVIC	ELOCATION		7141	1137112	<b>ETELE</b>	PHONE	(859) 363	3-5263		
COMPARISONS	DAYS SERVICE	TOTAL KWH,	COLOR OF STREET STREET	The state of the s	CLE		TOTA	L ACCC	OUNT BA	LANCE		\$284.83
URRENT BILLING PERIOD	29	2590	89 -		19	CURRENT	BILL DUE	03/17/1	8 BILL IS	DELINQUE	NT AFTER	DUE DAT
REVIOUS BILLING PERIOD	29 29	2572 2132	89 74	RATE:	CLASS	historia anni di <u>man</u> adadh na mana	كأت سنادب ما ميا العماما عبالميا		DUE DA	who weld a the Chief	and the state of the	\$297.87
white the same and the fall age with	ty Use Over The La			_ <u>~</u>								

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ENERGY SAVINGS TIP - Set your thermostat to 68 degrees F and consider installing a programmable thermostat. For more ways to save visit www.TogetherWeSave.com. Thank you.

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ACCOUNT-NUMBER		ACCOUNT N	AME		SERVI	CE ADDRESS :	The state of the state of	METER NUMBER	
	NIXUTIL S	SANITATIO	N ASSOC IN	C 119	68 CATALII	NA DRIVE -	SEWER	175414	08/29/18
SERVICE PE	RIOD.	NO. DAYS	PREVIOUS	rer readin Preșent	G, CODE	METER MULTIPLIER	BILLED DEMAND	KILOWATT HOURS	CHARGES
LOCAL SC	MENTAL SUR CHOOL TAX- ( LES TAX- 6% ENT BILL DUE OUNT DUE OR YOUR PA	CHARGE 3% 5 6 09/16/18	65826 JUSTMENT 9.820%	68643	0 d 17	1 209 118 311.03		2817 2817	261.29 -1.89 25.47 8.55 17.61 311.03 297.68 -297.68 311.03
EXT METER READING		17 1 2 4 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	CELOCATION		411137112	TELE	PHONE (859)	363-5263	
COMPARISONS .	DAYS SERVICE		AVG: KWH/DAY	CYCLE	360	TOTAL	ACCOUNT	BALANCE	\$311.03
URRENT BILLING PERIOD		2817	88	619	CURREN	T BILL DUE	09/16/18 BIL	IS DELINQUE	NT AFTER DUE DATE
REVIOUS BILLING PERIO AMÉ PERIOD L'AST YEAR		2711 2926	87 98	RATE CLA	00.	a. Ta Now : examinating for . Co	AFTER DUE	To the second discourage and	\$325.27
Committee of Association of the Control of the Cont	icity Use Over The L		<del></del>						
3,289 2,193			H R	EADY FO	K KENEWA		ENVIROWAT		PERATIVE SOLAR

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ACCOUNT NUMBER	3.5.4	ACCOUNT N	AME		SERVIC	E ADDRESS	METER NUMBER	BILL DATE
	NIXUTIL S	ANITATIO	N ASSOC IN	C 1196	8 CATALIN	A DRIVE - SEWE	R 175414	06/28/18
SERVICE PE	RIOD TO	NO. DAYS	PREVIOUS .	ER READING		12. 22. 20. 20. 20. 20. 20. 20. 20. 20. 2	LLED KILOWATT MAND HOURS	CHARGES
05/25/18	06/25/18	31	60443	63115	R	1	2672	249.13
-0.002170	C 404-079 000-00000 00-000000	ACTION AT ALL STATE AT A STATE OF THE STATE	USTMENT				2672	-5.80
	MENTAL SUR		9.800%				,	23.8
	CHOOL TAX- 3					e e	¥	8.0
STATE SA	LES TAX- 6%				· .		•	16.5
TOTAL CURRE		07/16/18					1	291.7
PREVIOUS AN					(4)			294.3
THANK YOU F		YMENT (S)	la .					-294.3
TOTAL AMOU	NT DUE							291.7
T.				Local	200	N.		٠

NEXT METER READING DATE 07/26/18 SERVICE LOCATION 71411137112 TELEPHONE (859) 363-5263 T. CYCLE COMPARISONS DAYS SERVICE TOTAL KWH AVG KWH/DAY TOTAL ACCOUNT BALANCE \$291.71 CURRENT BILLING PERIOD 31 86 619 2672 CURRENT BILL DUE 07/16/18 BILL IS DELINQUENT AFTER DUE DATE PREVIOUS BILLING PERIOD RATE GLASS 30 2625 88 AFTER DUE DATE PAY SAME PERIOD LAST YEAR 33 2415 73 52



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