

P.S.C. Ky. No.....

Cancels P.S.C. Ky. No.....

SYMSONIA WATER DISTRICT

OF

SYMSONIA, KENTUCKY

Rates, Rules and Regulations for Furnishing
WATER SERVICE

AT

NORTHEASTERN PORTION OF GRAVES COUNTY, KENTUCKY

PUBLIC SERVICE COMMISSION
OF KENTUCKY
EFFECTIVE

Filed with PUBLIC SERVICE COMMISSION OF
KENTUCKY

MAR 7 1994

ISSUED.....FEBRUARY 2....., 19.94...

PURSUANT TO 807 KAR 5:011.
SECTION 9 (1)
EFFECTIVE...MARCH.....19.94...
BY: *[Signature]*
PUBLIC SERVICE COMMISSION MANAGER

ISSUED BY...SYMSONIA WATER DISTRICT.....

(Name of Utility)
Harold McManus
BY HAROLD McMANUS.....

CHAIRMAN.....

C 5-95

Form for filing Rate Schedules

For Northwestern portion of Graves Community, Town or City Co.

P.S.C. NO. 2

Original 1 SHEET NO. 1

CANCELLING P.S.C. NO. 1

Original 1 SHEET NO. 1

SYMSONIA WATER DISTRICT
Name of Issuing Corporation

CLASSIFICATION OF SERVICE

	RATE PER UNIT
RATES: MONTHLY	
<u>5/8 x 3/4 Inch Connection</u>	
First 2,000 gallons	\$7.50 Minimum Bill
Next 3,000 gallons	1.70 per 1,000 gallons
Next 5,000 gallons	1.60 per 1,000 gallons
Over 10,000 gallons	1.50 per 1,000 gallons
 <u>2 - Inch Connection</u>	
First 20,000 gallons	\$35.60 Minimum Bill
Over 20,000 gallons	1.50 per 1,000 gallons
 <u>CONNECTION FEES</u>	
<u>5/8 x 3/4 Inch Connection</u>	\$375.00
<u>2 - Inch Connection</u> PUBLIC SERVICE COMMISSION OF KENTUCKY EFFECTIVE	Actual cost of installation

JAN 5 1988

PURSUANT TO 807 KAR 5:011,
SECTION 9 (1)

BY: George Selby
PUBLIC SERVICE COMMISSION MANAGER

DATE OF ISSUE January 21, 1988

DATE EFFECTIVE January 5, 1988

ISSUED BY Harold C. McManus
Name of Officer

TITLE Chairman

C-5-95

P.S.C. NO. _____

Original SHEET NO. 1

CANCELLING P.S.C. NO. _____

_____ SHEET NO. _____

SYMSONIA WATER DISTRICT
Name of Issuing Corporation

CLASSIFICATION OF SERVICE

RATE
PER UNIT

Rate: Monthly SYMSONIA FIRE DISTRICT

Hydrant Charge

\$ 2.93

New Hydrant

The charge for a new hydrant will be the actual cost of the hydrant plus installation.

PUBLIC SERVICE COMMISSION
OF KENTUCKY
EFFECTIVE

NOV 01 1989

PURSUANT TO 897 KAR 011,
SECTION 9

BY: [Signature]
PUBLIC SERVICE COMMISSION MANAGER

DATE OF ISSUE 9-20-89

DATE EFFECTIVE 11-1-89

ISSUED BY Harold McManus
Name of Officer

TITLE Chairman

Issued by authority of an Order of the Public Service Commission of Kentucky
in Case No. _____ dated _____.

C 11-95