

For: \_\_\_\_\_

PSC KY Number: \_\_\_\_\_

\_\_\_\_\_ Sheet No. \_\_\_\_\_

Cancelling PSC KY Number: \_\_\_\_\_

\_\_\_\_\_ Sheet No. \_\_\_\_\_

\_\_\_\_\_  
(Name of Utility)

**Special Nonrecurring Charges – Billing Related.**

1. Returned Check Charge: \$ \_\_\_\_\_

Will be assessed when a customer's check is returned, either due to insufficient funds or other reason due to customer fault.

2. Late Payment Penalty: \_\_\_\_\_ %

Will be assessed if a customer fails to pay a bill for services by the due date shown on the customer's bill. The penalty may be assessed only once on any bill for rendered services. Any payment received shall first be applied to the bill for service rendered. Additional penalty charges shall not be assessed on unpaid penalty charges.

3. Credit / Debit Card Fee: \$ Actual Cost

Will be assessed to customers that chose to pay their bill by credit or debit card. This method of payment may be made in person at the utility office or by telephone or if available, online.

If on the bill due date an attempt to pay by credit/debit card is made and the card is declined for any reason, payment is still due in full on that date and will be considered late after that date. All late charges and penalties will be applied. If a customer is paying on our disconnect day and the card is denied, the same rules as above apply, in addition to service being disconnected.

When a customer makes a payment by credit/debit card, the utility will assess a fee equal to that charged to the utility by the credit or debit card processing company to process the transaction. This fee is generally calculated using a formula applied to the balance of the amount charged to the credit/debit account but may be a flat fee per transaction. Prior to processing the transaction, the customer will be informed of the fee amount and, upon request by the customer, the formula employed to arrive at this fee amount.

DATE OF ISSUE \_\_\_\_\_  
*Month / Day / Year*

DATE EFFECTIVE \_\_\_\_\_  
*Month / Day / Year*

ISSUED BY \_\_\_\_\_  
*(Signature of Officer)*

TITLE \_\_\_\_\_

BY AUTHORITY OF ORDER OF THE PUBLIC SERVICE COMMISSION  
IN CASE NO. \_\_\_\_\_ DATED \_\_\_\_\_