



WATER USER AGREEMENT (ALL USERS)

I hereby make application and authorize Hyden-Leslie County Water District (“the District”) to turn on the water at the address listed below. I agree to **pay the bill for service** by the due date specified on the bill for water furnished to any address where I either have an interest in the ownership of the property, directly or indirectly, or have requested service, and I hereby agree to continue to be responsible for the same until I notify the District in writing to the contrary.

I agree to take the necessary measures to protect the meter box, meter setting and service. I agree to maintain at my own expense the service line beginning at the meter setting and extending to my dwelling or place of use. The service line will be maintained at a sufficient depth (a minimum of 24 inches) to prevent freezing during the coldest weather normally experienced. I will maintain a shut-off valve, one-way check valve, and pressure reducing valve on the outlet side of the meter. I will be responsible for damages to the District caused by me, my contractor and/or sub-contractor during any on-site construction.

I agree to abide by and comply with the District’s rules, regulations and rates as approved by the Public Service Commission of the Commonwealth of Kentucky and as changed from time to time.

If, at any time, any bill owed by me to the District, whether collectible under this Contract or otherwise, is not paid when due or payable, then the District shall have the right to discontinue the supply of water to the location.

All applicants for water service will be required to have a copy of photo identification on file and pay a security deposit as of \$74.00 and must present identification card containing the applicant’s photo. In lieu of photo identification, the applicant may present an alternate form of identification such as an identification card with applicant’s name issued by a Kentucky county government or any food stamp identification card, electronic benefit transfer card, or supplemental nutrition assistance card issued by Kentucky state government that shows the applicant’s name. A credit card or debit card showing the applicants name is not an acceptable alternate form of identification.

Please complete the following information

Customer Name _____

Service Address _____

City _____ State _____ Zip Code _____

Billing Address (if different) _____

City _____ State _____ Zip Code _____

Home Number _____

Mobile Number _____

Do you agree to receive SMS for alerts and updates about your account
(please circle) Yes No

Email Address _____

Driver's License Number _____

Primary use of building (please circle) Residential Commercial

Do you Own or Rent service address (please circle) Own Rent

If rent, name of Landlord/Owner _____

Landlord/Owner Phone Number _____

Do you have a rental agreement: (please circle) Yes No

If so, please provide a copy of the rental agreement with this contract.

Do you owe the District for water service furnished at the service address or another address?
(please circle) Yes No

Is there any person who will be reside at the service address who owes the District for water
service furnished at the service address or another address? (please circle) Yes No

Customer Signature _____ Date _____

Utility Signature _____ Date _____