

FOR Entire Area Served
Community, Town or City

P.S.C. KY. NO. 2
1st Revised SHEET NO. 7

Barkley Lake Water District
(Name of Utility)

CANCELLING P.S.C. KY. NO. 2

Original SHEET NO. 7

B. Deposits

1. Barkley Lake Water District requires a cash deposit to secure payment of bills.
2. Deposit amount shall be \$100.00 (I)
3. Interest will accrue on all deposits at the rate prescribed by law beginning on the date of the deposit. Interest accrued will be refunded to the customer or credit to the customer's bill on an annual basis. If interest is paid or credited to the customer's bill prior to twelve (12) months from the date of deposit or the last interest payment date, the payment or credit shall be on a prorated basis.
4. The deposit minus the final bill is refunded the following month upon discontinuance of service.
5. Service will be refused or discontinued if payment of deposit is not made.

DATE OF ISSUE February 15, 2024
Month / Date / Year

DATE EFFECTIVE March 16, 2024
Month / Date / Year

ISSUED BY /s/ Scott Bridges
(Signature of Officer)

TITLE Chairman

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

FOR Entire Area Served
Community, Town or City

P.S.C. KY. NO. 2
2nd Revised SHEET NO. 8

Barkley Lake Water District
(Name of Utility)

CANCELLING P.S.C. KY. NO. 2

1st Revised SHEET NO. 8

C. SPECIAL NONRECURRING CHARGES-METER RELATED

- | | | |
|---|-------------|-----|
| 1. 1. Meter Connection/Tap On Charge (3/4): | \$1250.00 | (I) |
| Will be assessed to hook up a new (3/4) meter connection/tap on. | | |
| 2. Meter Connection/Tap On Charge Greater Than 3/4 | Actual Cost | |
| Will be assessed to hook up a new meter connection greater than ¾. | | |
| 3. Meter Relocation Charge: | Actual Cost | |
| Will be assessed when a customer or other authorized persons request that a meter be Relocated, changed, or modified. Those requesting a change must reimburse the District For the actual cost incurred, including but not limited to appropriate legal, administrative, or other related costs. | | |
| 4. Meter Re-read Charge | \$25.00 | |
| Will be assessed when a customer requests the District to re-read the customers meter and the re-read proves that the original meter reading was correct. | | |
| 5. Meter Test Charge | \$25.00 | |
| Will be assessed when a customer requests the District to test the meter for accuracy and the test proves the meter to be not more than (2%) fast. The District will perform such test on any meter upon written request I the request is not made more than once every (12) months. | | |
| 6. Meter Damage | Actual Cost | |
| Will be assessed when meter damage is determined to be caused by negligence of the customer. | | |

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(Signature of Officer)

TITLE Chairman

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

Barkley Lake Water District



POST OFFICE BOX 308 • CADIZ, KENTUCKY 42211
OFFICE: (270) 522-8425 • PLANT: (270) 924-5616
FAX: (270) 522-8448

CUSTOMER PARTIAL PAYMENT AGREEMENT FORM

Date: _____ Account No.: _____

Customer Name (Please Print Legibly): _____

I (we) _____

promise to pay the current monthly bill by end of 5th day of month or next business day. All arrears from previous billing month must be paid prior to signing an agreement for current bill. I understand that my account will be subject to all delinquent and/or 10% late payment billings. I also understand that my water service will be discontinued if I fail to pay the agreed amount set forth below.

Payment Amount: _____

Date(s) of Payment: _____

Customer's Signature: _____

BLWD Employee Witness: _____

We are an Equal Opportunity Employer

Serving Eastern Shore of Barkley Lake in Trigg County, Kentucky

H:\Master Forms\Customer Partial Payment Agreement Form 02-2024.1

Barkley Lake Water District



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CUSTOMER BANK DRAFT AUTHORIZATION FORM

I, _____, request that **BARKLEY LAKE WATER DISTRICT** debit my account each month for payment of my water bill utilizing the automatic draft process. I understand this procedure will not take effect until the following month and that it is my responsibility to notify **BLWD** one month in advance when I wish to discontinue the service.

I agree to supply **BARKLEY LAKE WATER DISTRICT** with a voided check to be used solely for the purpose of setting up my automatic draft account. No other means of account identification will be accepted.

I understand that any returned drafts presented back to **BLWD** for nonpayment will be subject to a \$5.00 fee. Should your bank draft be returned, the automatic draft payment option will be discontinued until the account has been cleared. It will be the customer's responsibility to contact **BLWD** to make arrangements to continue the automatic draft payment option on the account.

Customer Signature

Date

BLWD Account No: _____

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H:\Master Forms\Customer Bank Draft Authorization Form.Docx

Barkley Lake Water District



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CUSTOMER BILLING OR PHONE INFORMATION UPDATE

PLEASE PRINT ALL INFORMATION

BLWD ACCOUNT NO: _____

NAME OF PERSON ON ACCOUNT: _____

SERVICE ADDRESS: _____

CITY, STATE, ZIP CODE: _____

INFORMATION TO UPDATE:

BILLING ADDRESS: _____

BILLING CITY, STATE, ZIP CODE: _____

PHONE NUMBER: _____ CELL PHONE NUMBER: _____

IF YOU HAVE ANY OTHER CHANGES TO PERSONAL INFORMATION, PLEASE CONTACT OUR OFFICE AT (270)522-8425 FOR ASSISTANCE.

Customer Signature

Date

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H:\Master Forms\Customer Billing Address Or Phone Update Form 02-2024.Docx
Serving Eastern Shore of Barkley Lake in Trigg County, Kentucky

Barkley Lake Water District



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CUSTOMER ADJUSTMENT FORM

Effective January 29, 2013 **BARKLEY LAKE WATER DISTRICT** requires the following information prior to any adjustments to a customer's account due to a leak.

Date: _____ Account No.: _____

Customer Name (Please Print Legibly): _____

Address: _____

City, State, Zip Code: _____

Location and cause of leak: _____

Date leak was discovered: _____ Date leak was repaired: _____

Person/Business making the repair: _____

Please provide a copy of the receipt for the repair bill or for parts used to make the repair.

These are the terms of the water adjustment being provided by **BLWD** in response to your recent water leak at the address above. The adjustment is provided under the authorization of the BLWD Policy and assumes the leak is fully repaired. You are permitted one leak adjustment every 12 months. You will not be eligible for another water leak adjustment until _____, 12 months from the date of this adjustment.

BARKLEY LAKE WATER DISTRICT is providing you with an adjustment in the amount of \$ _____.

This agreement does not alter your responsibility to pay any **BLWD** account you may have on time. To avoid penalties the bill must be paid by the 15th of the billed month.

By signing this document, you agree to the terms stated above.

Customer Signature

Date

BLWD Employee Signature

BLWD use only

Total Bill Amount: _____

Average Bill Amount: _____

Leak Qualifies for ¼ (5 x average): ____ or ½ (10 x average): ____

or does not qualify for adjustment: ____

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Barkley Lake Water District



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FAX: (270) 522-8448

CUSTOMER AUTHORIZATION TO FINAL ACCOUNT FORM

PLEASE PRINT ALL INFORMATION

BLWD ACCOUNT NO: _____

NAME OF PERSON ON ACCOUNT TO FINAL: _____

SERVICE ADDRESS: _____

CITY, STATE, ZIP CODE: _____

DATE TO LOCK or READ: _____

FORWARDING ADDRESS: _____

FORWARDING CITY, STATE, ZIP CODE: _____

Customer Signature

Date

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Serving Eastern Shore of Barkley Lake in Trigg County, Kentucky

H:\Master Forms\Customer Authorization To Final Account Form 02-2024.I

Barkley Lake Water District



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OFFICE: (270) 522-8425 • PLANT: (270) 924-5616
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51A380 (1-23)
Commonwealth of Kentucky
DEPARTMENT OF REVENUE

DECLARATION OF DOMICILE FOR PURCHASE OF RESIDENTIAL UTILITIES



(LANDLORDS OR OTHER ACCOUNTHOLDERS OF MULTI-UNIT DWELLINGS SERVED BY A SINGLE METER (MASTER METER) USE THE MULTI-METER DECLARATION OF DOMICILE)

In accordance with the provisions of KRS 139.470(7) this declaration may only be executed for the purchase of sewer services, water, and fuel by Kentucky residents for use in heating, water heating, cooking, lighting, and other residential uses. "Fuel" shall include but not be limited to natural gas, electricity, fuel oil, bottled gas, coal, coke, and wood.

_____ is the accountholder for _____
Name of Accountholder *Service Address*

I, _____, am the resident or
Name of Individual Signing the Declaration (cannot be landlord)

Relationship of the undersigned to the resident

I declare that the address listed is my place of domicile* or the place of domicile* of _____
Name of Resident

and the purchase of residential utilities for use at this address meets the qualifications for exemption from Kentucky sales and use tax under KRS 139.470(7).

Accordingly, I request the account associated with the above listed service address be classified as exempt from sales and use tax. I understand the exemption will begin on the date of the first full billing cycle after the date of receipt of this declaration by the utility provider or rural electric cooperative.

Under penalties of perjury, I swear or affirm that the information on this declaration is true and correct as to every material matter.

Signature if resident or representative

Date

* KRS 139.470(7) describes a place of domicile as "the place where an individual has his or her legal, true, fixed and permanent home and principal establishment, and to which, whenever the individual is absent, the individual has the intention of returning."

Instructions

- Submit the Declaration of Domicile to each applicable utility provider or rural electric cooperative, not to the Department of Revenue.
- Each resident may have only one place of domicile but may be listed as a responsible party for other service addresses.
- The change in taxability for accounts will be effective on the first day of the first full billing cycle after the date of receipt of this declaration by the utility provider or rural electric cooperative.

Department of Revenue Contact Information: _____
Phone: 502-564-5170 Email: _____
DOR.Webresponsesalestax@ky.gov

BLWD Account Number: _____

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Serving Eastern Shore of Barkley Lake in Trigg County, Kentucky

Barkley Lake Water District



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51A380 (1-23)
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_____ is the accountholder for _____
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I, _____, am the resident or
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Department of Revenue Contact Information: _____
Phone: 502-564-5170 Email: _____ We are an Equal Opportunity Employer
DOR.Webresponsesalestax@ky.gov

Serving Eastern Shore of Barkley Lake in Trigg County, Kentucky

Barkley Lake Water District



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EASEMENT

THIS EASEMENT is made between _____,
Hereinafter called the Grantor, and the Barkley Lake Water District, which is organized under the provisions of K.R.S. Chapter 74, hereinafter called the Grantee:

WITNESSESETH: For and In Consideration of similar conveyance by the owners of other properties located within said water district, the sufficiency of which hereby acknowledged, the Grantor hereby grants unto the Grantee a temporary construction easement of thirty (30) feet in width along _____ and a permanent easement of ten (10) feet in width as it abuts said route for the purpose of installing, repairing, and maintaining water mains and accessories for a water system to be constructed and operated by said water district with full rights of ingress and egress for said purposes.

This easement is across the lands conveyed to the Grantor by deed from _____
Dated _____, and recorded in Deed Book _____, Page _____ office of _____ County Court Clerk, and including all adjacent lands of the Grantor regardless of any omission or irregularity in the foregoing description of title reference.

The undersigned shall retain the right to use the surface of the land over which the easement extends, except that no permanent structure shall be installed over the permanent easement. The Grantee shall restore the land of it condition, or reasonably so, as existed immediately preceding the exercise of its right and privileges.

The Grantee shall bury all pipes so that they are not interfering with the normal cultivation of the land.

The temporary easement granted shall cease upon the completion of construction of the water system, and the permanent easement shall be in perpetuity.

TO HAVE AND TO HOLD said easement unto the Grantee, its successors, and assigns, with Covenant of General Warranty.

IN TESTIMONY WHEREOF, we have hereunto set our hands this the ____ day of _____, 20____.

STATE OF KENTUCKY
COUNTY OF _____

I, _____, a NOTARY PUBLIC, in and for the state and county aforesaid do hereby certify that the foregoing instrument in writing was produced before me by _____, who each acknowledged and executed said instrument for the purpose mentioned.

WITNESS my hand and notarial seal this ____ day of _____, 20____.

My Commission Expires: _____
Notary Public

STATE OF KENTUCKY
COUNTY OF _____

I, _____, a NOTARY PUBLIC, in and for the state and county aforesaid do hereby certify that the foregoing instrument in writing was produced before me by _____, who each acknowledged and executed said instrument for the purpose mentioned.

WITNESS my hand and notarial seal this ____ day of _____, 20____.

My Commission Expires: _____
Notary Public

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Barkley Lake Water District



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Welcome to **Barkley Lake Water District**, P.O. Box 308, Cadiz, KY 42211, we are pleased to be your water provider! Please read our **CUSTOMER AGREEMENT/BILLING INFORMATION DISCLOSURE**, sign and complete the attached forms, and provide a copy of a photo ID. We require payment in the amount of ONE HUNDRED DOLLARS (\$100.00) for the account deposit. Checks or Money Orders can be made payable to BARKLEY LAKE WATER DISTRICT. Cash is also accepted or payment by debit/credit card is available. A processing fee for cards of 2.75% of the payment amount will be added by our payment system if you choose to use your card for the deposit.

The deposit in the amount of ONE HUNDRED DOLLARS (\$100.00) made to the Barkley Lake Water District is necessary to ensure payment of monthly water bills and any penalties on delinquent water accounts as prescribed in the tariff of the water district. Once the final bill and/or penalties have been satisfied any remaining amount of deposit will be refunded to the customer.

All payments are due the 15th day of the month, failure to receive bill does not excuse payment. Penalties are accrued upon opening the next business day, not before the 16th day of the month. Non-payment of an account by the 26th day of the month, or the first working day thereafter, will result in discontinuance of water service by physically locking the meter. Before reconnection can be made, a fee of SIXTEEN DOLLARS (\$16.00 = LOCK FEE \$10.00 and UNLOCK FEE \$6.00), plus the full payment of the water bill is required. An AFTERTHOUS FEE of SIXTY-FOUR DOLLARS (\$64.00) will be charged for any meter unlocked after 4:00 p.m. Monday through Friday or on weekends. Delinquent Locked accounts that remain unpaid will be set to a status of Final during the end of month processing, which results in the ONE HUNDRED DOLLAR (\$100.00) deposit being applied to the account balance. Delinquent Accounts with a credit balance after Final processing will be issued a refund. Accounts with a balance owed are considered due to Barkley Lake Water District. If a Delinquent Locked account is set to a status of Final the customer will be reestablished as a new account. The reestablishment process would include settling unpaid previous account balance including any penalties if one existed after the deposit was applied and paying ONE HUNDRED DOLLAR (\$100.00) deposit for the new account.

Customers must install and maintain a cutoff valve for their use between the meter and their dwelling. The cut off valve on the meter is not to be routinely used by the customer, as continuous usage will result in eventual failure of the valve. Installation of a pressure regulator on the customer side is also highly recommended. Meter readings are now processed by a radio read meter system and are costly to repair. Any damage sustained to an installed radio read meter will result in a charge to the customer. Tampering with meter, service, or valves constitutes disconnection of service and is considered a felony.

PLEASE COMPLETE THE ATTACHED FORMS IN FULL

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Barkley Lake Water District



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CUSTOMER ACCOUNT INFORMATION

TODAY'S DATE: _____ EFFECTIVE DATE IF DIFFERENT FROM TODAY: _____

HAVE YOU EVER BEEN ON OUR WATER BEFORE? _YES __NO

Will this be your Primary Residence: Yes (complete DOD Form) or No Do you own or rent this property: _____

PRIMARY ACCOUNT HOLDER: _____

SERVICE ADDRESS INFORMATION:

SERVICE ADDRESS OF PROPERTY: _____

SERVICE CITY, STATE, ZIP CODE: _____

PREVIOUS RESIDENT AT THIS LOCATION: _____ LANDLORD'S NAME: _____

PERSONAL INFORMATION:

BILLING ADDRESS (if different from Service Address): _____

BILLING CITY, STATE, ZIP CODE: _____

SS#/EIN _____ DATE OF BIRTH: _____

TELEPHONE (including area code): _____

CELL PHONE (including area code): _____

EMAIL ADDRESS: _____

EMPLOYER: _____

SPOUSE/SECONDARY NAME: _____ SS# _____

SPOUSE/SECONDARY DOB: _____ EMPLOYER: _____

SPOUSE/SECONDARY CELL PHONE (including area code): _____

PRIMARY ACCOUNT HOLDER'S SIGNATURE: _____

YOU AGREE TO REIMBURSE US THE COLLECTION FEES OF ANY COLLECTION AGENCY, WHICH SHALL BE BASED ON A PERCENTAGE AT A MAXIMUM RATE OF 33.3% OF THE AMOUNT DUE AT THE TIME YOUR ACCOUNT IS PLACED WITH A COLLECTION AGENCY, AND ALL COSTS AND EXPENSES INCURRED FOR ANY COLLECTION EFFORTS ON YOUR ACCOUNT, INCLUDING REASONABLE ATTORNEY'S FEES INCURRED BY THE COLLECTION AGENCY. THIS CONTRACT SHALL COVER ALL GOODS AND SERVICES UNTIL REVOKED BY EITHER PARTY IN WRITING.

For office use only: ACCOUNT NO. (LAST ACTIVE ACCOUNT) _____ Status: Final/ed or inactive UNLOCK: _____ READ METER _____ COPY TO CUSTOMER _____

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Barkley Lake Water District



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NEW ACCOUNT/INFORMATION SHEET

PLEASE READ AND COMPLETE INFORMATION

“The following information is requested by the Federal Government in order to monitor compliance with Federal Laws prohibiting discrimination against applicants seeking to participate in this program. You are not required to furnish this information, but are encouraged to do so. This information will not be used in evaluating your application or to discriminate against you in any way. However, if you choose not to furnish it, we are required to note the race/national origin of individual applicants on the basis of visual observation or surname.”

Ethnicity:

Hispanic or Latino _____

Not Hispanic or Latino _____

Race: (Mark one or more)

White ____ Black or African American ____ American Indian/Alaska Native ____

Asian ____ Native Hawaiian or Other Pacific Islander ____

Gender: Male ____ Female ____

This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law. Complaints of discrimination may be filed with the USDA Director, Office of Civil Rights, Washington 20250-9410

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Barkley Lake Water District



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CUSTOMER CONTACT CONSENT FORM

I hereby expressly give my full consent to **Barkley Lake Water District** (service provider), its agents and assigns, to contact me at the mobile, wireless, or wire line numbers provided as part of the service agreement, or application, or any numbers I may subsequently acquire, for normal business communications, including, but not limited to, efforts of collection on existing accounts opened after the date of execution of this consent.

I further expressly consent that **Barkley Lake Water District** (service provider), its agents and assigns, may use live-callers, pre-recorded messages, auto dialers, "robocalls", progressive dialers, predictive dialers, or other similar technology for said normal business communications. I expressly waive all claims against and hold harmless **Barkley Lake Water District** (service provider), its agents and assigns, for the use of such callers or dialer technology for the purposes of contacting me for normal business communications. This consent will remain active until accounts of the undersigned are closed or until expressly revoked in writing by the undersigned customer.

Should my number ever change, I will notify **Barkley Lake Water District** (service provider) that my mobile, wireless, or wire line number(s) have changed.

CUSTOMER NAME (Please Print Legibly)

CUSTOMER SIGNATURE

DATE

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