

NEW CUSTOMER PACKET FOR NEW TAP ONs

The Crittenden-Livingston Water District

Mailing Address: 620 East Main Street Salem Ky 42078

Phone number: 270-988-2680

After hours emergency number 270-988-2060

Office Hours: Monday- Friday 8am-4pm

Welcome to The Crittenden-Livingston Water District. Please read the information in this packet and fill out the appropriate forms. You will find all the information you need to have a great relationship with the CLWD. Upon setting up your account you will have access to set up a portal on our website clwaterdist.com on this website you will find all kinds of useful information along with the ability to pay your monthly water bills.

Here at the water district, we offer several different ways to pay your monthly water bill. We strive to make it as easy as possible for our customers to pay their bills. Listed below are your options:

- **In office payment** (we do have a drop box on the side of the building).
- **Mail in payments**
- **Automatic Payments via a Bank account** (Please bring a voided check into the office)
- **Online payment** (Fees and charges may apply)
- **Over the phone automated payments** (Fees and charges may apply)
- **Your water bill will be due on the 15th of the month.** This means that the bill is due in the office on the 15th, unfortunately if the payments are received after the 15th there will be a ***10% late fee added to your bill.*** If the 15th falls on a Sunday or Holiday, the customer has until the next business day to pay their water bill without being assessed a penalty. We mail out your water bills on the last day of the month that we are open, and you should expect your bill around the first week of the month. **WE ARE NOT RESPONSIBLE FOR MAIL DELIVERY**

Failure to pay your water bills:

After the 15th of the month delinquent notices are mailed out to individuals who qualify for disconnection. You will have until the date stated on the disconnections notice to pay at a minimum the arrears on your account. Failure to do so will result in disconnection on the designated cut-off day! Payment will need to be made by 7:30am on the morning of the cut-off date to ensure you are taken off the cut-off list. After that we cannot take you off the list without payment in hand. **We are not responsible for mail delivery or if the website is down. You will still be responsible for the payment of your water bill before disconnection.**

If your water is disconnected for non-payment, you will be required to pay the **FULL** amount of your bill plus **\$50.00** reconnection for nonpayment fee before water can be reinstated.

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New Tap on Information Sheet

To get started with a new meter connection with the Crittenden-Livingston Water District
here is what you need to know!

What you are required to bring with you to establish new connection:

- Photo ID
- Copy of the Deed (If we can verify via the PVA website deed not required please call first)
- Payment in the form of **CASH OR CHECK** only
- New Service Address (We do understand you may not have been issued a 911 address upon coming in. Please call once address is established.)

All new customer connections will need to contact their local Health Department for their new service address. The health department will instruct you on how to obtain either an **AFFIDAVIT FOR FARMSTEAD EXEMPTION** or **PLUMBERS PERMIT**. The Water district will need a copy of whichever one your qualify for.

Plumbers Permit: Is required for individuals who own less than 10 acres of land.

Affidavit for Farmstead Exemption: Is required for individuals who own more than 10 acres of land.

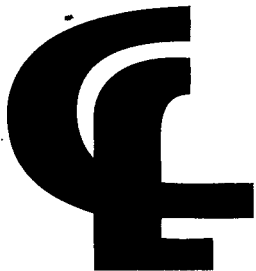
Neither one of the Forms are required upon signing the contract. However, ***you are required to provide the appropriate form before the water district will install your meter into the new box.***

Meter Sizing Options:

¾ inch.....	\$750.00
1 Inch	\$850.00
2 inch	At Cost

What will happen once the contract is signed & payment is made:

- A wooden stake will be provided. Place the stake on the property where you want your meter to go. The water district will install the meter within 5 feet of the existing water main, or on the applicant property at a point which is closest to the existing water main. Please place stake promptly after purchasing the meter.
- The Distribution team will come and look at the property. The customer does not have to be present. They will gather the information to call in an 811 Bud ticket to mark the appropriate utility lines.
- The timeline for this installation will vary. The distribution team is very busy. Therefore, it does take time for these connections to be placed. We have a duty to provide water for our existing customers and we pride ourselves on this. So unfortunately, water leaks and other matters do take precedent. We will get your meter set as soon as we possibly can.
- Once the box is placed and you have provided either the ***Affidavit for Farmstead Exemption or Plumbers Permit***, the customer whose name is on the account will need to call or come in to begin service.
- We will have your meter installed within 24 hours. Once the meter has been installed your first billing cycle will begin.
- Congratulations on being a part of The Crittenden-Livingston Water District System.



CRITTENDEN-LIVINGSTON

County Water District

620 East Main • Salem, Kentucky 42078

Phone (270) 988-2680 • Fax (270) 988-4892

Disconnection of Service at Customers Request

The Crittenden- Livingston Water District requires 3 days notice for disconnection of service. Please remember our billing runs a month behind. Therefor the final bill will be mailed to your new residence, you will still be responsible for said final bill. Outstanding bill do not follow the house they follow the customers. The Crittenden- Livingston Water District will not allow any individual to establish a water service who owes has a delinquent bill.

Customer Name: _____

Service Address: _____

City: _____

Final Billing Address: _____

City: _____ State: _____ Zip code: _____

Final Reading Date Requested: _____

Request via Phone: _____ In Office: _____ Email: _____ Mail: _____

Customer Signature: _____ Date: _____

Meter Order for Office Use Only:

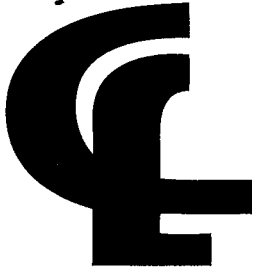
Final Reading: _____

Final Reading Date: _____ Work Done By: _____

Meter Serial Number: _____

Previous Reading: _____

Account Number: _____



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Customer Billing Address or Phone Number Update Form

(This form can be mailed, emailed or brought into the office for
account changes)

Service Address: _____

City: _____ State: _____ Zip Code: _____

Account Holders Name: _____

Account Number: _____

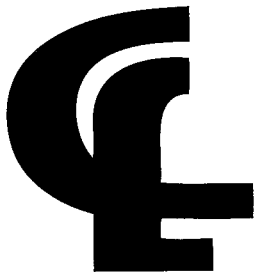
New Billing Address:

City: _____ State: _____ Zip code: _____

New Phone Number: (____) _____

Customer Signature: _____

Date: _____



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Contract for New Water Service

New Service Address: _____

City: _____ Zip code: _____ Account Number: _____

Phone Number: _____

This contract made and entered into this _____ day of _____ between (owner)
_____ whose address is _____

FIRST PARTY, and CRITTENDEN-LIVINGSTON WATER DISTRICT, 620 East Main St, Salem Ky 42078, Second Party:
WITNESSETH

That for and in consideration of the effort of the SECOND PARTY (CLWD) and in consideration of the other signing similar contracts, the FIRST PARTY hereby agrees to connect to the CLWD system and the SECOND PARTY.

Tap-on fee to the CLWD water system is \$ _____, being required at the time of signing the Contract.

The monthly water rates will be reasonable and approved by the Public Service Commission,

It is understood and agreed that the CLWD reserves the right to determine the size of service connections to be used to supply water to the FIRST PARTY. A 5/8"x3/4" meter will be used unless the FIRST PARTY contracts for a larger meter.

A SEPARATE METER MUST BE INSTALLED FOR EACH RESIDENCE.

A separate contract will be required for trailer parks.

The FIRST PARTY'S rights hereunder are subject to such further rule and regulations as the CLWD may prescribe. The CLWD may terminate service to any customers failing to pay a water bill when thirty (30) days past due or for violating the CLWD regulations.

Deposits to ensure payment of monthly water bills and penalties on delinquent water accounts shall be as the CLWD PARTY may hereafter prescribe.

THE FIRST PARTY agrees to permit the CLWD to lay, maintain, repair, remove and disconnect a service line and meter, and read meters at a point on customers property to be designated by the CLWD for each signed connection with rights of ingress and egress for these purposes over the customer's property.

THE FIRST PARTY AGREES TO INSTALL AND MAINTAIN AT HIS OWN EXPENSE A SERVICE LINE WHICH SHALL BEGIN AT THE WATER METER AND EXTEND TO THE DWELLING OR PLACE OF BUSINESS AND OTHER PORTION OF HIS PREMISES. EXCEPT TO AN ADDITIONAL LIVING SPACE AT THE SAME ADDRESS OR LOCATION.

The failure of the FIRST PARTY to pay water charges duly imposed shall result in the automatic imposition of the following penalties:

- A. Non-payment within 10 days from the due date will be subject to a penalty of ten percent (10%) of the delinquent account.
- B. Non-payment within fifty (50) days or Fifty (\$50.00) whichever occur first.
- C. In the event it becomes necessary for the CLWD to shut off the water, a fee of **\$50.00** will be charged for reconnection of the service. THE FIRST PARTY will also be required to pay all delinquent accounts in full.

FIRST PARTY

SECOND PARTY

Crittenden-Livingston Water District

Owner: _____

By: _____

Customer Application

Today's Date: _____

Effective Date (If different): _____

(WE DO NOT ACCEPT NEW ACCOUNT SET UPS MORE THAN 48 HOURS AHEAD OF TIME)

Have you ever had water with us before? ____ Yes ____ No

Renter: _____ Property Owner: _____

Is this your primary Residence: ____ Yes (if so Complete Declaration of Domicile form) ____ No

Account Holder Full Name: _____

Service Address: _____

City: _____ State: _____ Zip Code: _____

If you're a Renter Landlords Name: _____

Telephone Number: _____

Date of Birth: _____

(YOU MUST PROVIDE A PHOTO ID BEFORE ESTABLISHING SERVICE)

Billing Address (if different from Service address):

City: _____ State: _____ Zip Code: _____ Email

Address: _____

Meter Order for Office Use only:

Effective Date: _____ Account Number: _____

Customer Name: _____

Service Address: _____ City: _____

Phone Number: _____ Meter Number: _____

Last Reading: _____ Last Reading Date: _____

Type of Work Requested: Installations _____ Reconnect _____ Disconnect _____

NEW METER INSTALLATION

Acknowledgement of Requirement Form

The Kentucky State Plumbing Code requires a *Plumbing Permit* or an *Affidavit for Farmstead Exemption* for the installation of a new water service.

By Signing this form, you are acknowledging that you understand and accept that you will be responsible for obtaining the appropriate documentation for the installation of your meter. You can obtain these at your service addresses local Health Department.

Crittenden County Health Department

190 Industrial Drive
Marion Ky 42064
(270)-965-5215

Livingston County Health Department

124 State Street
Smithland Ky 42081
(270) 928-2193

Customer Signature: _____ **Date:** _____

EPA Lead & Copper Service Line Inventory:

What is your personal Service lines made of?

_____ PVC _____ Pex/Tubing _____ Galvanized _____ Copper _____ Unknown none lead

The Year House was built: _____

Customer Signature: _____ **Date:** _____

**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-UNIT 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 of 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

Installation of New Meters

Customer Name: _____

Service Address: _____

City: _____ **Phone Number:** _____

Account Number: _____ **New Account Number:** _____

Installation Date Requested: _____

New Meter Serial Number: _____

New Internal Id (ERT) Number: _____

Meter Size/ Type: _____

Start Reading: _____

Date Installed: _____

Work Done by: _____