

**Municipal Water & Sewer System  
PO Box 430, Central City, KY 42330**

Phone: (270) 754-3066  
Fax: (270) 754-9711  
E-mail: water@centralcityky.com

**DEPOSIT FOR UTILITY SERVICE**

A deposit in the amount of **ONE HUNDRED FIFTY DOLLARS (\$150.00)** is made to Municipal Water & Sewer System, Central City, KY. This deposit is necessary to ensure payment of monthly utility bills, penalties, and service charges on delinquent utility accounts as prescribed by ordinances of the City of Central City, KY. Upon termination of utility service, the deposit on account will be applied to the balance due. Once the balance due has been satisfied, any remaining amount of deposit will be refunded to the customer.

In addition, this contract is for out-of-city sewer hookup. The fees for said hookup are \$4,500 for tap and grinder pump. The sewer rates for out of city customers is set forth in KOC#610.02 Section 9(C).

Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Service Address \_\_\_\_\_

Landlord Name \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

Employer Name & Address: \_\_\_\_\_

I, the undersigned, understand and authorize use of my utility deposit to pay outstanding utility bills upon termination of my services. Once the balance due has been satisfied, any remaining balance will be refunded. I further understand that the tap and grinder pump and discharge line fees must be paid in full, either by full payment in advance or by being added to my monthly bill, at the discretion of the Municipal Water & Sewer System. I further understand that any charges, including legal and court fees, for collection of delinquent accounts (including, but not limited to the collection for hookup fees) will be added to the total due.

Signature \_\_\_\_\_ Date \_\_\_\_\_

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**TO BE COMPLETED BY CLERK**

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Identification: Social Security Number \_\_\_\_\_ Driver's License Number \_\_\_\_\_

Other Identification (if none of above) \_\_\_\_\_

The following information regarding race, national origin and gender is requested to assure the Federal Government, acting through Rural Development, that the City of Central City is complying with Federal Laws prohibiting discrimination against applicants.

You are not required to provide 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, the City of Central City is required to note your race, national origin and gender on the basis of visual observation and/or surname.

Race (Mark one or more): American Indian/Alaskan Native \_\_\_\_\_ Asian \_\_\_\_\_ Black or African American \_\_\_\_\_

Native Hawaiian or Other Pacific Island \_\_\_\_\_ White \_\_\_\_\_ Other \_\_\_\_\_

Ethnicity: Hispanic or Latino \_\_\_\_\_ Not Hispanic or Latino \_\_\_\_\_

Gender: Male \_\_\_\_\_ Female \_\_\_\_\_

*"The City of Central City is an equal opportunity provider and employer."*