



The City of Paris

"THOROUGHBRED CAPITAL OF THE WORLD"

525 HIGH STREET
PARIS, KENTUCKY 40361

PHONE (859) 987-2110
FAX (859) 987-4640
TDD (859) 987-2100

NEW ACCOUNT APPLICATION

All new account requests must be presented with proof of ownership, a lease, or a rental agreement.

Please Circle One: Residential Owner Residential Tenant

NAME: _____

DRIVER'S LICENSE NO: _____ SOCIAL SECURITY: _____

NAME: _____

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NAME: _____

DRIVER'S LICENSE NO: _____ SOCIAL SECURITY: _____

PHONE: _____ TURN ON DATE: _____

SERVICE ADDRESS _____

IF TRANSFERRING, WHAT IS THE CURRENT ADDRESS: _____

Deposit Information

To guarantee payment for water, sewer and/or electric services, a deposit must be paid before services can be initiated. After 24 months of uninterrupted service and you have a good credit standing with the City of Paris, a deposit refund (plus interest) will be applied to your account. If you terminate your service before the 24 months have accrued, the deposit will be applied to your final bill.

Customer Contract

1. I hereby request and authorize City of Paris Combined Utilities to supply water, sewer, sanitation, and/or electric service to the above described property until receipt of formal notice from me requesting discontinuance of such.
2. I agree to promptly pay for said utility services. Payments are due by the 15th of the month, for payments made after the 15th a penalty fee is applied. Nonpayment by the 26th will result in cut off of utilities and a \$30 reconnect fee will apply. Return check fee is \$50.
3. I understand and agree that failure to pay can/will result in services being disconnected and not reconnected until such payment has been received.

Customer Signature

Date

OFFICE USE ONLY

Account Number: _____

Deposit Amount: _____

Cash, Check or Auth No. _____

Deposit Slip No: _____

Utilities Clerk: _____

Date: _____