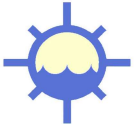


Payment Authorization Form



Hardin County Water District No. 2
Customer Deposit

Name:	Date:
Address:	Customer Deposit - \$60.00
	Phone:
	Phone:
Email Address:	Type: <input type="checkbox"/> Water <input type="checkbox"/> Sewer <input type="checkbox"/> Both

TOTAL

Customer Deposit Total	\$60.00
Processing Fee	\$2.50
Payment Total	\$62.50

PAYMENT AUTHORIZATION

YOUR SIGNATURE ON THIS PAYMENT AUTHORIZATION FORM DENOTES ACCEPTANCE OF ALL TERMS & CONDITIONS INCLUDED ON THIS FORM AND THIS WATER USER AGREEMENT AND ACCOUNT APPLICATION.

* Please Note - Returned payments are subject to a \$25.00 fee. Returned payment of a deposit will result in termination of service without further notice until such deposit is paid in full.

Credit Card -For your convenience, Hardin County Water District No. 2 will use this authorization to charge your credit or debit card account for your customer deposit. There is a \$2.50 processing fee for credit/debit card transactions. All other payments may be made in our office at 360 Ring Road in Elizabethtown.

AMEX
 VISA
 MasterCard
 Discover

EXP. DATE

Account Number	
Security Code	Visa/MasterCard/Discover (3 Digits), Amex (4 Digits)

Cardholder Printed Name: _____

Cardholder Billing Address: _____

City/State/Zip: _____

*** The cardholder named above hereby authorizes Hardin County Water District No. 2 to charge my credit or debit card for the total payment amount above.

CARDHOLDER SIGNATURE: _____ DATE: _____

PAYMENT POLICY: -Hardin County Water District No. 2 requires payment of deposit in full, at the time services are requested. All services will be denied without complete payment. NO DEPOSITS WILL BE BILLED AND MUST BE PAID IN ADVANCE.

TAX EXEMPT STATUS: -If you are exempt from paying sales tax, you must forward a certificate of exemption prior to the time of payment.



* Applications will not be processed without receipt of PHOTO ID, and LEASE OR DEED, and DEPOSIT.

* Automatic payment applications will not be processed without receipt of a VOIDED CHECK. or copy of a check.

*E-MAIL these documents to accounts@hcwd2.org

You will receive an confirmation email when your account has been successful processed. Please allow 24 hours.