

**CHRISTIAN COUNTY WATER DISTRICT
CUSTOMER METER READING AGREEMENT**

DATE _____

I, the undersigned, have paid the necessary fees needed to acquire water services from CHRISTIAN COUNTY WATER DISTRICT.

If I have a manual meter, I have been instructed as to how to read the water meter, and I understand that it is my responsibility to read the water meter EVERY MONTH. If I have a radio read meter, I understand that it is not necessary for me to read the water meter monthly.

Should I not read the meter as required, or in the event of technical difficulties preventing the transmission of my meter reading to CCWD'S collection device, I understand that it will be my responsibility to pay for any and all water that has been used or has run through this meter, at which time the correct reading is collected by The Christian County Water District's personnel.

Should I not use any water from this service, I understand that I will still be responsible to pay the required minimum bill for this service.

Signature _____

Print name: _____