

## Town of Hamilton Application for Utility Service

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**THIS FORM MUST BE COMPLETED BEFORE UTILITY SERVICE CAN BE CONNECTED**

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Date of application: \_\_\_\_\_, 20\_\_\_\_\_  
Customer Name: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Billing Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
Cellphone: (\_\_\_\_) \_\_\_\_-\_\_\_\_ Home Telephone: (\_\_\_\_) \_\_\_\_-\_\_\_\_  
Social Security Number: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ (Office will keep a copy on file with your application)  
Place of Employment: \_\_\_\_\_  
Spouse Information  
Social Security Number: \_\_\_\_\_  
Driver's License Number: \_\_\_\_\_ (Office will keep a copy on file with your application)  
Place of Employment: \_\_\_\_\_  
Emergency Contact Information:  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_  
Name: \_\_\_\_\_ Relation: \_\_\_\_\_ Phone: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

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### **Rental Information:**

Please list the Owner's Name: \_\_\_\_\_  
Phone Number of Owner: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_  
Owner's Address: \_\_\_\_\_

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### **MUST BE SIGNED AND DATED**

I attest that the above information is correct to the best of my knowledge and that I am responsible for all charges and bills associated with this account. I also am attesting to the fact that I have read and understand the Utility Connection and Procedure Ordinance and have received a copy.

Printed Full Name: \_\_\_\_\_  
Signed Full Name: \_\_\_\_\_  
Date: \_\_\_\_/\_\_\_\_/\_\_\_\_\_

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**Office Use Only:**

Account #: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Location #: \_\_\_\_\_

Deposit Amounts \_\_\_\_\_

Date of Service Connection: \_\_\_\_/\_\_\_\_/\_\_\_\_

Type of Service:

Inside Town Limits: \_\_\_\_ Water & Sewer \_\_\_\_ Water Only \_\_\_\_ Electric  
\_\_\_\_ Commercial \_\_\_\_ Residential

Outside Town Limits: \_\_\_\_ Water & Sewer \_\_\_\_ Water Only \_\_\_\_ Electric  
\_\_\_\_ Commercial \_\_\_\_ Residential

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**Town of Hamilton Rental Authorization Form:**

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

This is acknowledgement that \_\_\_\_\_, is going to move into my residence located at \_\_\_\_\_ and has my permission to have the utilities turned on at this residence.

(If a lease was signed or any documentation in regard to the rental agreement Office will keep a copy on file with your application.)

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**Mobile Homeowner- Home owner or Agent Signature:**

Contact Number: (\_\_\_\_)-\_\_\_\_-\_\_\_\_\_

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

Printed Full Name: \_\_\_\_\_

Signed Full Name: \_\_\_\_\_

Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

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## Town of Hamilton Utility Connection and Procedure Ordinance

PO Box 249, Hamilton, NC 27840

#020521

### Section I: Application for Services

- A. All users must apply for service from the Hamilton Town Hall and make any deposit that is required.
- B. All new utility connections and reconnections that occur after a 6-month vacancy of the property must comply with the county and local codes and ordinances. This shall occur at the homeowner's cost. Any residence that is vacant for 6 months or more is required to be inspected and cleared by the county building inspector.
- C. Any new water/sewer connections put in require you to have back flow preventers installed at the customer's cost.
- D. For safety reasons all water faucets must be turned off when service is connected.
- E. Someone at least 18 years or older must be at the place of residence at the time at which the services are connected, to ensure satisfaction and safety. a. Initial service connection will be turned on within a 24-hour period from when the deposit was placed via an appointment made between the resident and maintenance department.
- F. The ONLY person able to ask for services to be disconnected on any account is the person whose name is on the account, regardless of who pays the bill.
- G. The only people that have authorization to look at an account are the account holder and those people that are listed on the authorized account person's form.
- H. In the event of someone's passing any deposit will be remitted to the Estate of the deceased unless proof of Executor of the Estate can be shown, and then will be remitted to that person.
- I. To close an account of someone whom is deceased the account may remain open as long as it is current for a time period of 6 months during the closing of the estate. It may be closed earlier than that at the request of the family. Once a request to shut off a deceased person's estate is submitted the account must be put in someone else's name and it will not be reopened in the name of the person whom is deceased. If there is a family dispute with this situation proof of executor of estate must be shown or the account will remain on, unless unpaid until the 6-month time has lapsed.

## **Section II: Security Deposits**

A. Security Deposits are as listed below unless otherwise authorized by the Town of Hamilton Board.

- a. \$500.00 Security Deposit for (Inside Town Limits) Residential Customers
- b. \$450.00 Security Deposit for All Commercial Customers
- c. \$300.00 Security Deposit for All Outside of Town Limit Customers
- d. \$200.00 Hamilton Ridge Security Deposit (Electric Connection Only)
- e. \$250.00 Security Deposit for the subsequent properties owned if more than one property is owned inside town limits, and the original deposit was placed on the primary property.

**B. Deposits placed WILL NOT draw interest.**

C. Letters of credit WILL NOT is accepted to wave security deposits with the town.

D. Additional Security Deposits may be required after a 12-month time, if:

- a. The utilities are disconnected twice within that 12-month time-period.
- b. The deposit placed would not cover 2 times the average utility bill during that 12-month time-period.

E. When a deposit is placed with the Town of Hamilton, the deposit amount in full will NOT be returned to the customer until the time in which the customer closes the account with the Town of Hamilton. The deposit will be applied to any balance on the account at the time of the account's closure, and any remaining balance will be forwarded in the form of a check to the mailing address on file for the customer.

- a. If you are moving you MUST indicate the new address to remit the check. If you do not it will be sent to the last mailing address on file.
- b. The Town of Hamilton is NOT responsible for a check being forwarded to the incorrect mailing address if not informed that the mailing address has changed.
- c. The Town of Hamilton will remit these checks during the next payroll cycle after the disconnection date after proof of deposit can be established.

## **Section III: Billing & Fees**

**A. Town of Hamilton Utility Bills are ONLY billed for the usage indicated by the resident's meters. We WILL NOT bill you for any usage that is not indicated by your meter.**

**B. Meter Readings and information regarding meter readings is as follows:**

- a. Meters will be read on or around the 25<sup>th</sup> of each month.
- b. Accounts are billed for the previous month's usage.
  - i. Example: A bill dated January 9, 2021, is for the time-period 11/25/2020-12/25/2020.
- c. Bills are printed at the end of the business day on the 8<sup>th</sup> of every month to ensure all payments are posted and are reflected on their utility bill.
- d. These bills will be mailed on approximately the 9<sup>th</sup> of each month.
- e. They are due by the 8<sup>th</sup> of the following month.
- f. Please refer to the chart below for a detailed explanation:

**EXAMPLE**

- **Bills dated:** December 9<sup>th</sup>, 2022.
- **Meters were read on or around** November 25<sup>th</sup>, 2022.
- **Bills were printed** December 9<sup>th</sup>, 2022.
- **Bills were mailed** December 9<sup>th</sup>, 2022.
- **Bills are due** January 8<sup>th</sup>, 2022.
- **Bills are late** January 8<sup>th</sup>, 2022.
- **Bills are subject for disconnection** January 16<sup>th</sup>, 2021.

**C. Disconnections:**

- a. If utilities are disconnected, you will be responsible for paying the reconnection fee listed in the fee chart below.
- b. Disconnections apply only to the amount past due amount including any late charges that are still on account 52 days after the original bill date. Please refer to the example chart above to see example listed.
- c. Utilities will not be reconnected until the account has been paid in full including any fees associated with the disconnection. Service may be restored the same day if payment is made before 12:00pm on that business day. Any payments made for reconnection after 12:00pm will be handled on the next business day between the hours of 8:00-12:00. No reconnections will be made on weekends or holidays.

**D. Payments:**

- a. Payments may be made in Cash, Check, Money Order, or by Credit or Debit card (Excluding American Express)
- b. NO TWO-PARTY CHECKS WILL BE ACCEPTED
- c. Payments may be put in the drop box located at the front of the building before or after business hours. The drop box is checked once daily.
- d. Partial Payments will be accepted and applied to your account but DOES NOT alter the Town's policy on Disconnection and does not grant you a payment extension.
- e. PAYMENT EXTENSIONS ARE ONLY AUTHORIZED BY THE TOWN OF HAMILTON BOARD. Please review the section below to indicate how to request a payment extension
- f. Payment extensions will ONLY be authorized a maximum of 2 times during a calendar year as approved by the board.
- g. Budget Billing is offered to any Town of Hamilton customer that has had service with the Town of Hamilton for 12 consecutive months.
  - i. Payment is required to be made by the 5<sup>th</sup> of the month following the signing of the budget billing contract.
  - ii. If you take part in Budget Billing and do not make your payments your services will be disconnected on the 15<sup>th</sup> day of the following month as those who are not in budget billing.
  - iii. If you take part in Budget Billing and discontinue your payments and pay your normal bill you are not allowed to participate in the program for another 12 months.

**E. Fees**

- a. Reconnection Fee: \$25.00
- b. Returned Check Fee: \$35.00
- c. Meter Tampering Fee: \$100.00 (plus any subsequent usage accumulated during that time)

**F. Billing Disputes:**

- a. At the customer's request a meter will be checked at the cost of the Town of Hamilton
  - i. If the meter is tested and found to be in compliance, the cost of any testing items will be the sole responsibility of the customer. Cost will be

listed for the flat rate as established and amended from time to time by the board on the fee schedule.

ii. If the meter is faulty the bill will be adjusted on the average % of the last 12-month time frame. If this time frame is not applicable it will be averaged for the amount of time the account has been active.

iii. If the customer is still unhappy with the resolution of the situation, they may put in a formal request to the Town of Hamilton Board in the form of a Meter Error Form for formal review and final decision.

b. If the customer believes their bill was done in error the customer must fill out a Billing Error Review Form, which will be reviewed by the Town Clerk as well as the mayor. If the customer is unhappy with the resolution of the situation, they may resubmit the issue to the Town of Hamilton Board for formal review and final decision.

c. Water leaks are eligible for adjustments 2 times during a calendar year. This is once any receipt or information can be provided to the Town of Hamilton stating the water leak was addressed.

i. If a water leak is detected by a resident of the town and proof of repair is submitted, the town will make an adjustment to the sewer bill. The town will adjust the bill to the average annual bill amount for that customer. It is not to exceed 50% of the sewage billed cost. Any time the effects of a leak are on the following month's bill it will also be adjusted for those days.

ii. If the water leak can be proven to not drain into the sewer system (i.e., a leaking pipe outside the home, under the home, a pipe in the yard from the meter to the home) the sewage cost will be removed in full for that month, but the water must be paid.

iii. If an amount in excess of half the sewage is requested to be adjusted the resident may fill out a Sewage Adjustment Excess Form to be submitted to the Board for their approval and final decision.

iv. Property Owners are responsible for the service of their water lines from the point of the Town of Hamilton's meter to the house and inside the home. They are not responsible for a faulty meter or lines that are before the meter.

**G. Any issues and concerns involving maintenance may be addressed by submitting a Maintenance Request Form to the Maintenance Supervisor. If the resident is**

concerned or would like their request addressed further, they may submit that request form to the Town of Hamilton Board.

**H. Forms Listed above available to any Town of Hamilton Active Account Holder**

**a. Account Authorization Form**

**b. Sewage Adjustment Form**

**c. Billing Error Review Form**

**d. Meter Error Form**

**e. Maintenance Request Form**

If New internal controls and billing procedures are adopted from this information it will be amended on February 2nd, 2023 and will supersede any prior internal control ordinance. Submitted for review to the Town of Hamilton Board of Commissioners and for public review on February 2, 2023.

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**Account Authorization Form**

Name of Account Holder: \_\_\_\_\_

Account #: \_\_\_\_\_

Names of persons authorized to make any changes, request information, or disconnect the account on your behalf please list below:

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Name: \_\_\_\_\_ Relation: \_\_\_\_\_

Date of form submission: \_\_\_\_\_/\_\_\_\_/\_\_\_\_\_

Received by:

\_\_\_\_\_

Name

Position

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**Sewage Adjustment Form**

Name of Account Holder: \_\_\_\_\_

Account #: \_\_\_\_\_

Adjustment Amount Requested: \$ \_\_\_\_\_

Reasoning for adjustment request:

\_\_\_\_\_  
\_\_\_\_\_

What Amount was authorized and adjusted by the rules governing the clerk: \$ \_\_\_\_\_

The decision of the Town of Hamilton Board: The adjustment request in the amount of \$ \_\_\_\_\_ is Approved/Denied on a vote \_\_\_\_ - \_\_\_\_ on this the date of \_\_\_\_/\_\_\_\_/\_\_\_\_ If applicable.

An alternate adjustment amount has been approved of \_\_\_\_\_. On a vote on this the date of \_\_\_\_/\_\_\_\_/\_\_\_\_\_

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**Billing Error Review Form**

Name of Account Holder: \_\_\_\_\_

Account #: \_\_\_\_\_

Adjustment Amount Requested: \$ \_\_\_\_\_

Please select utilities that are being questioned for review and rereading:

\_\_\_\_\_ Water & Sewer

\_\_\_\_\_ Electric

\_\_\_\_\_ Both Office Use Only Below this line

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**Office Use Only Below this line**

Received by date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Mark which person received this item and list the name \_\_\_\_\_

Clerk \_\_\_\_\_ Mayor \_\_\_\_\_

**Note method(s) used to verify billing:**

\_\_\_\_\_  
\_\_\_\_\_

Resolution of the situation (Mark all that apply):

\_\_\_\_\_ Billing was verified to be accurate resident is requested to pay the billed amount in full.

\_\_\_\_\_ Billing was incorrect. Proven with methods listed above

\_\_\_\_\_ Billing has been adjusted in the amount of \$ \_\_\_\_\_

Date of Resolution: \_\_\_\_/\_\_\_\_/\_\_\_\_.

Resolution was authorized by:

\_\_\_\_\_  
Name Position

Confirmed resolution was completed:

\_\_\_\_\_  
Name Position

\_\_\_\_\_

