

**APPLICATION FOR UTILITY CONNECTION
CITY OF MADISONVILLE**

67 North Main Street, Madisonville, KY 42431
Phone: 270-824-2108 Fax: 270-824-2168

Date _____

Owner's Name _____ Phone _____

Owner's Address _____

Address of Proposed Utility _____

I, _____ hereby apply for (water) (sewer) or service to property shown above subject to approval by the Madisonville City Council. If this application is approved, I agree I will not oppose annexation of this property to the City of Madisonville.

Owner's Signature _____ Owner's Signature _____

(Applicant must provide a copy of their deed and an application fee of \$25.00 made payable to the City of Madisonville)

For Official Use Only

Statement of Utility Superintendent

I recommend approval of the utility connection.

Utility Superintendent Date Utility Superintendent Date

Zoning Administrator Date

Approved by the City Council on _____
Date

Attest: City Clerk _____
Date

Notes, if any

THIS AGREEMENT made and entered into on this the _____ day of _____, 20____, by and between _____, whose address is _____, hereinafter called the First Party, and the City of Madisonville, Kentucky, a municipal corporation, hereinafter called the Second Party;

WITNESSETH: That whereas the First Party is the owner of a certain tract of land more particularly described in Deed Book _____ Page _____, Hopkins County Court Clerk’s Office, reference to which is hereby made for a more detailed description, and:

WHEREAS, the First Party has made application to the Second Party for _____ beyond the city limit, at the following address _____.

NOW THEREFORE, in consideration of the agreement by the Second Party to furnish _____ to the property of the First Party, which is located beyond the city limits, the First Party covenants and agrees (he) (she) (they) will not oppose any future attempt to annex the property herein mentioned to the city limits of the Second Party.

This agreement shall be covenant to run with the land herein above described.

Owner

Owner

For Official Use Only

STATE OF KENTUCKY COUNTY
OF HOPKINS ASCT.

This agreement was acknowledged before me by _____
on this the _____ day of _____, 20____.

Notary Public
My Commission Expires: _____
Notary ID: _____

Notes _____

Prepared by _____
Debbie Todd, Zoning Administrator, City of Madisonville