



PUBLIC UTILITY FEE REPORT – RURAL WASTEWATER UTILITY REPORTS –

CLASS A, B, & C

State Form 50499 (R9 / 1-17)

INDIANA UTILITY REGULATORY COMMISSION

CALENDAR YEAR 2016

Utility Identification Number: _____
 Utility Name: _____
 Street Address (number and street): _____
 City/State/ZIP: _____
 Telephone Number: () _____

ACCOUNT NUMBER	ACCOUNT TITLE	TOTAL OPERATING REVENUE	TOTAL INTRA-STATE REVENUE
521.1	Flat Rate Residential Revenues	_____	_____
521.2	Flat Rate Commercial Revenues	_____	_____
521.3	Flat Rate Industrial Revenues	_____	_____
521.4	Flat Rate Revenues From Public Authorities	_____	_____
521.5	Flat Rate Multiple Family Dwelling Revenues	_____	_____
521.6	Flat Rate Other Revenues	_____	_____
522.1	Measured Residential Revenues	_____	_____
522.2	Measured Commercial Revenues	_____	_____
522.3	Measured Industrial Revenues	_____	_____
522.4	Measured Revenues From Public Authorities	_____	_____
522.5	Measured Multiple Family Dwelling Revenues	_____	_____
524	Revenues From Other Systems	_____	_____
536	Other Wastewater Revenues	_____	_____
770	Bad Debt Expense - Debit	_____	_____
	TOTAL	=====	=====

I certify that the foregoing information is accurate and is in agreement with the books and records of the utility for the year ended December 31, 2016.

Signature: _____
 Printed Name: _____
 Title: _____
 Telephone Number: () _____

Address to send fee bill to (if different than above):

Name: _____
 Business Name: _____
 Street Address (number and street): _____
 City/State/ZIP: _____
 Telephone Number: () _____

Return completed forms to:

IURC
 101 W. Washington St., Suite 1500-E
 Indianapolis, IN 46204
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 E-mail: feebilling@urc.in.gov