



# Leak Adjustment Application

**PLEASE NOTE** – While your application is under review, please be sure to pay any outstanding invoices by their due dates to avoid disruption of service and additional charges.

**REVIEW PROCESS** – The leak adjustment review process may take up to ten business days. Leak adjustments are reviewed by comparing consumption this year to the same time last year. You will receive a phone call with the results of the review. All qualified adjustments will be credited to your utility account.

Customer Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Service Address: \_\_\_\_\_

Date leak was discovered: \_\_\_\_\_

Date leak was repaired: \_\_\_\_\_

Who repaired the leak? \_\_\_\_\_

Description and location of leak: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Explanation of how leak was repaired: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please verify all items listed below are included with your application. Applications missing documents will be returned and denied without review.

- All leak repairs have been completed. **(REQUIRED)**
- I've attached all required repair invoices and receipts. If no receipt, please provide a letter **(REQUIRED)**
- I've attached a copy of the water bill where I had high consumption that I would like reviewed **(REQUIRED)**
- I have not applied for a leak adjustment within the past 12 months **(REQUIRED)**

**My signature certifies** that I meet all of the above requirements, have provided all required documentation, and declare that all of the above information is true and complete to the best of my knowledge. I understand that if a leak adjustment is granted based on erroneous information, the City reserves the right to reverse such adjustments.

Signature \_\_\_\_\_ Date \_\_\_\_\_