

Water Department Leak Adjustment

Date _____

Name _____ Account # _____

Service Address _____

Mailing Address _____

Date Leak Detected _____

How leak was detected and location of Leak:

Leak fixed by _____

Verified by _____

Date _____

Notes _____

By signing the above, I hereby state that the water leak was not due to a leaky faucet or other plumbing fixture, and has been repaired. I understand that I am being given this adjustment on my water bill and can only receive one adjustment in any 12-month period.

Customer _____

Date _____

Amount of adjustment _____

Clerk _____