

WATER LEAK ADJUSTMENT REQUEST

REQUIREMENTS FOR WATER LEAK ADJUSTMENT

1. City may request a copy of a receipt to show work has been completed.
2. City Crew will check meter to determine if leak has been fixed.
3. Adjustments are made for ONE month based on the average of the prior six (6) months.

DATE OF REQUEST: _____

ACCOUNT NUMBER: _____

NAME: _____ ADDRESS: _____

TYPE OF WATER LEAK: _____

REPAIR DATE: _____

REPAIRED BY WHOM: _____

Customer Signature

For Official Use Only

INSPECTED BY: _____

City Official

Reading

Date

- Approved
- Denied: Reason _____

Signature