

REQUEST FOR A BILL ADJUSTMENT DUE TO LEAK

NAME: _____ ACCT #: _____ DATE: _____

Alpha-Talbott Utility District's leak adjust policy allows for one bill adjustment per twelve month period. To be eligible for an adjustment, the bill must be \$100.00 more than the average bill and a written request must be made containing the following information, along with proof of repair. This will include a bill or statement from plumber or company or receipt for the materials if repaired by the owner.

1. How did you discover the leak?

2. What was the date of the leak?

3. When was the plumbing replaced or repaired?

4. How was the plumbing problem resolved?

5. Who made the necessary repairs?

6. What precautions have been taken to prevent the problem from reoccurring?

This written request for an adjustment must be submitted by 12:00 noon Friday before the first Monday of each month in order to be considered at the Board of Commissioners meeting.

Telephone # _____ Are you on Bankdraft? _____