Water Leak Adjustment Request Form

Date: ____ / ____ / ____  City Account Number: ______________________________

Service Address: ____________________________  Billing Period: ____________________________

Location Type:  Single Family Residential - [ ]  Non-Residential - [ ]

**Leak Adjustment Policy** (Ordinance 5600, 6-15-2011)

- The City will process and grant no more than **one** water billing adjustment for water leaks on the customers' side of the water meter per water service connection every **five (5) years**. Adjustments will be calculated over the billing periods when the water leak occurred, up to a maximum of two (2) regular meter reading cycles. Leak adjustments will be granted for **service lines only between the meter and the foundation of the building**.

- A written request for a water billing adjustment must be submitted to Utility Billing Customer Service within sixty (60) days of discovery of the water leak and/or sixty (60) days of receipt of a notice from the City regarding high water consumption and that a leak might have occurred. **The written request must include the service address, billing periods over which the leak occurred, location of the leak and a copy of the repair receipt with a clear written description of the completed repair. Photos verifying the repair and the location of the leak are strongly recommended.**

**Adjustment Methodology** (Ordinance 5210, 6-5-06)

- The water portion of the bill will be adjusted by charging for only 50% of the excess consumption charge over the billing period(s) when the leak occurred. Example of an adjusted water billing calculation: **(0.50 X Consumption in excess of historical average for billing period) X Commodity Rate.** Adjustments greater than $2,000 shall be submitted to the Finance Committee for approval or denial. There will be no adjustment of the Basic Monthly Charge or any other water charge. (Ord. 5210, 6-5-2006)

- For non-residential sewer accounts, a full adjustment of the sewer bill will be made for all leaked water that did not enter the sanitary sewer system. The adjustment will be determined by averaging normal water consumption from previous representative billing periods and charging wastewater volume rates based on this normal average volume. Adjustments greater than $2,000 shall be submitted to the Finance Committee for approval or denial. There will be no adjustment of the base charge or any other sewer charge.

Date Leak was repaired: ____ / ____ / ____  Leak Repaired By: ____________________________

Location of Leak: ____________________________

Type of Leak: ____________________________

Property Owner Name: ____________________________  Contact Phone#: ____ / ____ / ____

Property Owner Signature: ____________________________  Date: ____ / ____ / ____

Note: *Attach repair receipts to this request form. Adjustment will not be processed without proof of repair.*

Approved [ ]  Denied [ ]  Reason: ____________________________