



# Application for Lost or Wasted Water or Sewer Adjustment

Date:				Date of Bill	
				Reflecting Leak:	
Service Address:					
Name:					
Social Security No:		Drivers License No:		St:	
Mailing Address:					
Phone No: ( ) -		Alternate No: ( ) -			
Email Address:					
Employer:		Phone No: ( ) -			
Description of Water Leak / Waste					
Location:					
Detailed Description:					
Repaired by:					
<input type="checkbox"/> Professional (Company Name):			<input type="checkbox"/> Self		
Customer must show evidence the leak has been located and repaired. Evidence may be in the form of a bill marked paid from a licensed plumber (preferred) or receipt(s) for parts for a self-repair, accompanied by photos of the repair.					
<b>Customer Signature</b>					
I Acknowledge this adjustment is only allowed once every eight years per address per Ordinance Section 13.04.042					
If Renting/Leasing Provide Property Owner Information					
Name:					
Mailing Address:					
Phone No: ( ) -		Alternate No: ( ) -			
<b>Owners Signature:</b>					
An application submitted by a tenant must be co-signed by the landlord/property owner.					