

**JOINT MUNICIPAL WATER & SEWER COMMISSION**

**LEAK ADJUSTMENT REQUEST**

DATE: \_\_\_\_\_

ACCOUNT # \_\_\_\_\_

CUSTOMER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PLEASE GIVE A BRIEF DESCRIPTION OF THE LEAK **AND** OF THE REPAIR, INCLUDE DATES:

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I HERBY REQUEST THAT JOINT MUNICIPAL WATER & SEWER COMMISSION MAKE AN ADJSUTMENT TO MY ACCOUNT, DUE TO THE ABOVE MENTIONED WATER LEAK.

I UNDERSTAND THAT IF THE LEAK WAS ONGOING FOR MORE THAN (1) MONTH, I AM ONLY ALLOWED (1) MONTH TO BE ADJUSTED.

I ALSO UNDERSTAND THAT I WILL NOT BE ELIGIBLE TO HAVE ANOTHER LEAK ADJUSTMENT UNTIL (12) MONTHS FROM THE DATE OF THIS LEAK.

***(PLEASE ATTACH A COPY OF THE INVOICE OR RECEIPT FOR REPAIR)***

\_\_\_\_\_  
CUSTOMER'S SIGNATURE

\_\_\_\_\_  
CONTACT (E-MAIL OR PHONE)