



# LEAK ADJUSTMENT FORM

Today's Date: \_\_\_\_\_

Account #: \_\_\_\_\_ Month(s) Affected: \_\_\_\_\_

Owner's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Tenant's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

**Service Address:** \_\_\_\_\_

Where was the leak located?

How was the leak fixed?

PLEASE ATTACH A COPY OF RECEIPT FROM ANY WORK OR MATERIALS USED.

LEAK ADJUSTMENT FORM

### Official Use Only

Sent to Shops: \_\_\_\_\_ Clerk: \_\_\_\_\_

Meter Number: \_\_\_\_\_

Leak Fixed? \_\_\_\_\_ Operator & Date: \_\_\_\_\_

Read: \_\_\_\_\_ Previous Read: \_\_\_\_\_

Owner Notified? (How): \_\_\_\_\_

Comments: \_\_\_\_\_

PLEASE RETURN TO CITY OF SUMNER UTILITIES