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## WATER LEAK ADJUSTMENT REQUEST

Today's date: \_\_\_\_\_ Customer's Name as listed on account: \* \_\_\_\_\_

Contact Name (if different then name on account): \_\_\_\_\_

Contact Phone Number and Email address: \_\_\_\_\_

Relationship to account: \_\_\_\_\_

Customer Number:\* \_\_\_\_\_ Account Number: \* \_\_\_\_\_

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

Date Leak Detected:\* \_\_\_\_\_ Date Leak Repaired:\* \_\_\_\_\_

**The Water Leak Adjustment Request Form and documentation of repairs must be received within ninety (90) days of the due date listed on the Customer's utility bill for the period in which the leak occurred. Submission of a Water Leak Adjustment Request Form does not guarantee an adjustment will be made to the account.**

Explain the location of the leak and what repairs were made.\*

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You must submit proof of repair (such as plumber's bill, receipt for parts, etc.)for the adjustment request to be processed. If proof of repair cannot be provided, water consumption must have returned to normal use the following month, and a written statement detailing the steps taken as proof of investigation must be provided and attested to by the account holder or agent.\*

Adjustments are limited to two consecutive months and a maximum of three adjustments per property and same account holder. Adjustments may not be approved for seasonal usage such as gardening, filling swimming pools, or washing vehicles; or for situations such as theft, vandalism or negligence.

*As a Customer for the above listed service address, I hereby apply for a billing adjustment under City of Boulder Water Leak Adjustment Program. I confirm that the above and any attached information is true and accurate.*

Customer Signature:\* \_\_\_\_\_

Date: \* \_\_\_\_\_  
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