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www.greaterharrison.com

LEAK ADJUSTMENT REQUEST FORM

TO BE COMPLETED BY CUSTOMER

FOR DISTRICT USE ONLY Average Usage:	Name on Account:		Account Number:
Mailing Service Address:	Daytime Phone No:		
Date Leak Was Discovered: Date Leak Was Repaired: Describe Location: Nature of Leak: ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the state of			
Date Leak Was Repaired: Describe Location: Nature of Leak: ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the state of	Address:	Address:	
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ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the proof that the above information is true and request that an adjustment be made to my but a significant of last leak adjustment: Signed:	Date Leak Was Discovered:		
ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the source of t	Date Leak Was Repaired:		
ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the proof of the proof	Describe Location:		
ATTACH PROOF THAT LEAK WAS REPAIRED!! (Example: Photos, Plumbers Bill, Materials Bill, et al., and the proof of the proof	Nature of Leak:		
I do hereby certify that the above information is true and request that an adjustment be made to my but the string of the string			
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I do hereby certify that the above information is true and request that an adjustment be made to my but the string of the string	ATTAOU DDOOF TUAT I FAV WAS DEDAU	DENII (Evample, Dhatae Dlumb	nore Dill Meteriale Dill e
Signed: Date: Date:			
Average Usage:			
Average Usage:			
Average Usage:	I do hereby certify that the above inform	nation is true and request that an a	djustment be made to my bi
Usage with leak:	I do hereby certify that the above inform	nation is true and request that an a	djustment be made to my bi
Date of last leak adjustment: 1) Was last leak adjustment over 12 months ago? 2) Is usage with leak twice average usage? 3) Is the leak source eligible? 4) Was request received on time? 5) Was adequate proof provided? Questions 1-5 must be answered Yes to qualify. Does Customer Qualify? YES NO YES NO YES NO YES NO Original Bill Adjusted Bill S Adjusted Bill S Adjusted Bill	I do hereby certify that the above inform Signed: FO	nation is true and request that an a	djustment be made to my bi
1) Was last leak adjustment over 12 months ago? 2) Is usage with leak twice average usage? 3) Is the leak source eligible? 4) Was request received on time? 5) Was adequate proof provided? 7 Questions 1-5 must be answered Yes to qualify. Does Customer Qualify? 1 YES 1 NO Original Bill 1 Adjusted Bill 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S 1 S	I do hereby certify that the above inform Signed: FO Average Usage:	DR DISTRICT USE ONLY gallons	djustment be made to my bi
3) Is the leak source eligible? 4) Was request received on time? 5) Was adequate proof provided? Questions 1-5 must be answered Yes to qualify. Does Customer Qualify? If YES then Original Bill Adjusted Bill S Adjusted Bill YES NO YES NO NO If YES then	I do hereby certify that the above inform Signed: FO Average Usage: Usage with leak:	OR DISTRICT USE ONLY gallons gallons	djustment be made to my bi
4) Was request received on time? YES NO 5) Was adequate proof provided? YES NO Questions 1-5 must be answered Yes to qualify. Does Customer Qualify? YES NO If YES then Original Bill \$	I do hereby certify that the above inform Signed: FO Average Usage: Usage with leak: Date of last leak adjustment: 1) Was last leak adjustment over 12 months ago?	OR DISTRICT USE ONLY gallons gallons YES	djustment be made to my bi Date:
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Adjusted Bill \$	I do hereby certify that the above inform Signed:	OR DISTRICT USE ONLY gallons gallons YES YES YES YES YES YES YES YES YES	Date:NO NO NO NO NO NO NO
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[&]quot;This is an Equal Opportunity Program. Discrimination is prohibited by Federal Law." To file a complaint of discrimination write USDA, Director, Office of Civil Rights, 1400 Independence Avenue, S.W., Washington, DC 20250-9410 or call (800) 795-3272 (Voice) or (202) 720-6382 (TDD).