

19601 NE Halsey Street Portland, OR 97230-7430 503-665-4179 - Phone 503-667-5108 - Fax www.rwpud.org

	Leak Adji	ustment R	equest Fo	rm	
Name:					
Account Number:					
Service Address:					
Phone:					
Date leak was discovered:					
Date leak was repaired:					
	Dog	cription o	f Look:		

Description of Leak:

How leak was repaired:

Please note: Completion of this form does not guarantee an adjustment will be made to your water bill. All requests are evaluated based on your average water consumption for the billing period. In order to qualify for an adjustment, the leak must be repaired and copies of any invoices or receipts for repairs made along with this form must be returned to the office prior to the next bill going out. If the form is not received within the time limit you will be responsible for the entire amount of leak consumption. Payments must still be paid by due date to avoid additional charges.

Customer Signature:	