



## Application for Adjustment to Water Bill Due to an Excusable Defect

Any residential, commercial, or multifamily customer of the City may request an adjustment of any water bill from the City no more than once in 24 months for water usage due to a loss of water through an excusable defect (**see below**) in the customer's water line for a period of thirty (30) days, or one (1) billing period. An application for adjustment must be submitted within thirty (30) days of receipt of billing, along with receipt of repair. This could be from a plumber or receipt of the repair product. Shutting off the water does not qualify as a repair.

If the adjustment application is approved by the Utility Official, the bill will be adjusted. An "average" water usage will be based on the previous twelve (12) months of consumption. The amount of water that exceeds the applicant's average monthly consumption becomes the "excess" usage. If the applicant has not been a customer for twelve (12) months, the average monthly consumption will be determined by the Utility Official by using the electronic meter reading system to determine actual loss as described by the applicant during a specific timeframe.

The customer will be responsible for paying the "average" usage plus 20% of the "excess" usage for the period covered by the application. Any adjustment due to the customer will be credited to the customer's active account or refunded if the account had been ended prior to a final decision. No adjustment will be given for \$ 25.00 or less.

***Definition of Excusable Defect** – The term "excusable defect" shall mean a rupture of leakage in the customer's underground water line(s) from the meter to the foundation and/or under the foundation as may be caused by freezing weather, settlement, corrosion, wear or accident. **The term does NOT apply to defective or out-of-repair faucets (inside or outside), internal wall plumbing, sprinkler systems, sprinkler heads, sprinkler lines, sprinkler solenoids, swimming pools, auto-fill pool equipment, toilets, toilet flappers or any outdoor fixture/accessory such as an outdoor kitchen.***

Applicant Name: \_\_\_\_\_ Account Number: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Bill Date: \_\_\_\_\_ Period Covered: \_\_\_\_\_

Describe the reasons for the requested adjustment. (Attach receipts and supporting documentation, such as pictures)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

City Manager's Approval \_\_\_\_\_ Date: \_\_\_\_\_