

## Georgetown Municipal Water & Sewer Service

## **Residential Leak Adjustment Application**

Customer Name:		
Account Number:		
Phone Number:		
Service Address:		
Date of Repairs:		
Who Made the Repairs:		
Description of Repairs:		
_		
Exact Location of Leak:		
	ttach copy of plumber's statement or receipt of materials used	1
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structure/building. The	a non-visual leak in the Residential customer service lateracustomer must provide a plumber's statement and/or description verification by GMWSS, the bill will be adjusted by the Leak Ad	of repairs showing that the leak
average usage over the pequal to $\frac{1}{2}$ of the excess	e than 12 months of service, the adjustment will be equal to ½ or previous 12 months. For customers with less than 12 months of over the system average of 5,000 gallons per month. The custom the leak, with the customer portion of the leak payment not to except the system.	f service, the adjustment will be ner will pay the amount of their
that are a consequence of	I to one adjustment per year and twice in a five (5) year period for deteriorating lines and/or other faulty equipment that have not bustments do not include faucet or toilet leaks, or faucets/hoses lef	peen repaired are not eligible for
I have read the above in correct and that all leaks	nformation and verify that all statements I have made in seeki have been repaired.	ng this adjustment are true and
I have reviewed and under	erstand the complete Leak Adjustment Policy available at GMWS	S.com/Leaks.
Signature:	Date:	