

<sup>30</sup> Fountain Utilities Water Leak Adjustment Form

## Refer to the "Water Leak Request for Adjustment Process" for additional information

Customer name as listed on the account:	
Owner Tenant Property Manager	
If account holder is a tenant, name of owner:	
Account Number	
Service Address:	Telephone Number
E-Mail Address:	
Date(s) of the Bill(s) containing water volumes associate	ed with the leak:
(Maximum two billing periods)	
Leak Repair Date	
Please ensure all receipts for repair are attached	This is a requirement.
The Water Leak Request form and documentatio	n of repairs must be received within sixty
(60) days of the due date listed on the customer'	s utility bill for the period in which the leak

What was the source of the leak?

occurred.

Describe what was done to fix or correct the water leak problem(s). Proof of repair is required and must be submitted with this form (i.e. Plumber itemized invoice, repair parts itemized receipt, or other documentation supporting any repairs). **EXPLAIN BELOW.** 

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Has a water leak adjustment been requested	d or made for this service address in the past?
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Yes No			
If residential, how many people reside at the service address?			
Was the premise vacant or unoccupied when leak occurred?	Yes	No	
If yes, please provide the period of time of the vacancy: _			_
Do you have insurance that covers this issue?	Yes	No	
If yes, have you contacted them?	Yes	No	
What was the result?			

As the customer for the above listed service address, I hereby apply for an adjustment under Fountain Utilities Water Leak Review Process.

Signature	Owner/Property	Mgr.)
0.0.0.00.00.0		

Signature (Tenant, if account holder)

Please refer to the Water Leak Adjustment Process for eligibility. If you need additional information please call us at 322-2010. Please submit this form and the required documentation to:

Fountain Utilities C/o Customer Service Supervisor 101 N. Main Fountain, CO 80817

## You may also fax the completed application including documentation of how the leak was fixed (receipts, invoice etc.) to the attention of:

Customer Service Supervisor Fax (719) 322-2011 Date

Date