LEAK ADJUSTMENT REQUEST FORM main 770-957-5043



DATE			
CUSTOMER NAME	ACCC	DUNT #	
PHONE NUMBER			
SERVICE ADDRESS			
PLEASE INDICATE BELOW WHERE THE LEAK OC	CCURRED		
<u>LEAK</u>			
INSIDE THE HOME			
WHERE IN THE HOME (TOILET, WALL, HOT WAT	TER HEATER)?		
OUTSIDE THE HOME			
WHERE OUTSIDE THE HOME (YARD, DRIVEWAY	, NEAR THE METER)?		
RECEIPT OF REPAIR ATTACHED: YES			
IF NO RECEIPT IS AVAILABLE, PLEASE E	XPLAIN WHY:		
I AM REQUESTING AN ADJUSTMENT TO MY	/ LITHETY BILL DUE TO A WATER LEAV.		
TAW REQUESTING AN ADJUSTMENT TO WIT	TOTILITY BILL DOE TO A WATER LEAK.		
SIGNATURE DATE SUBMITTED TO LG WATER			
OFFICE USE ONLY:	CREDIT FIGURED	<u>BALANCE</u>	<u>APPROVED</u>
GALLONS USED			
AVERAGE USAGE			

DIFFERENCE