



## WATER LEAK ADJUSTMENT POLICY

- A. The District will grant (1) leak adjustment per year, per account for water leaks. Swimming pools and irrigation systems are excluded from this policy.
- B. Customers will have to provide proof, of one of the following to apply for a water leak adjustment: 1) Plumbers invoice for the repair 2) Receipt for the materials to repair the leak 3) Picture of the exposed leak
- C. Adjustments will be based off of (6) month of average billing from the customer's account. If the account does not have a basis of 6 months of average billing the District will use the average of 3000 gallons per month for the leak adjustment.
- D. Any adjustment to the bill amount must take place after the leak or excessive water use has stopped or been repaired.
- E. Customer must keep all payments current or the agreement to adjust the billing amount may be withdrawn by the District.

# ***SOUTH BLOUNT COUNTY UTILITY DISTRICT***

## LEAK ADJUSTMENT FORM

I, \_\_\_\_\_, do hereby agree that SBCUD has granted me/us an adjustment for an excessive water bill. I understand that this adjustment consists of one month's average bill plus a rate of \$2.98/1000 of the incurred leak which may have occurred over a one or two month period. It is understood and agreed that this is a one-time per year adjustment. I understand I will not be eligible for another adjustment within the 12 months following this leak. If another leak occurs within that 12 month period I will be responsible for the entire leak.

	<u>Consumption</u>
Total Consumption of the Bill	_____
Less: Average Bill (12-month average)	_____
Total Leak	_____
Consumption x .298/100 Gallons	_____
+ Average Bill	_____
Total Amount Due (Before Tax)	_____
+ Tax (9.75%)	_____
Total Due	_____
Total Adjustment	_____

\_\_\_\_\_  
Signed

\_\_\_\_\_  
Account Number

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

\_\_\_\_\_  
Date

\_\_\_\_\_ I acknowledge that the above policy has been explained to me by  
\_\_\_\_\_ I fully understand the terms of this agreement.