



**Adjustment Request Form**

CUSTOMER NAME: \_\_\_\_\_ ACCOUNT NUMBER: \_\_\_\_\_ - \_\_\_\_\_

SERVICE ADDRESS: \_\_\_\_\_

TELEPHONE NUMBER: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_ EMAIL: \_\_\_\_\_

TYPE OF LEAK: (PLEASE CHECK ONE) DATE OF REPAIR: \_\_\_\_/\_\_\_\_/\_\_\_\_

\_\_\_\_ PIPE \_\_\_\_ TOILET

\_\_\_\_ POOL REPAIR ONLY (New pool & resurfacing for other than a leak repair **is not eligible**)

\_\_\_\_ IRRIGATION (new sod is not eligible)

\_\_\_\_ OTHER (please include in description)

Describe details of water leak, including location, duration, and repairs done. **Include proof of repairs such as itemized invoice from a plumber, itemized receipt of repair parts, or other documentary evidence of any repairs.** (The more information provided increases chance of adjustment approval.):

**By signing below, I confirm that the above information and any attached documentation is true and accurate.**

I am the owner/authorized agent for the property listed above. I am aware that there is a maximum of **1** adjustment per calendar year and I am requesting to use my adjustment for the purpose selected above. I am aware that I am responsible for any unpaid balance on my account and that submittal of this form does not prevent my account from further action or fees related to a late payment, delinquency processing fee, shut off water fee, etc. I also acknowledge that the **City of Punta Gorda** is not responsible for monitoring customer usage, notifying customers of leaks, locating leaks or repairing leaks on the customer side of the meter. I acknowledge that the leak adjustment requested may reduce my rate to the lowest tier, but will not remove all charges from my account. I have read this document in its entirety and acknowledge this by my signature below.

\_\_\_\_\_  
Owner/Authorized Agent Signature

\_\_\_\_\_  
Date

For official Use Only

Date adjustment Complete \_\_\_\_\_

By \_\_\_\_\_  
Customer Service Representative