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CITY
OF **LACEY**

Leak Adjustment Request Form

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Submittal of this form does not guarantee that a leak adjustment credit will be granted. A leak adjustment will be allowed under the following circumstances:

1. The repair occurred with 30 days of notification by the City.
2. No leak adjustments have been granted within five (5) years of any previous leak adjustment.
3. The consumption associated with the leak exceeded \$50.
4. The source of the leak was not from appliances, fixtures, or from inside the structure.
5. Adequate documentation of the repair and location of the leak is provided.

The methodology for a leak adjustment shall be 50 percent of the consumption associated with the leak. Commercial accounts may be granted credit for the sewer portion of the bill if the water did not enter the sanitary sewer system.

Customer Name: _____ **Account Number:** _____

Service Address: _____

Date of Repair: _____ **Leak Repaired By:** _____

Location of Leak: _____

Phone Number: _____ **Date Leak Noticed/Date of City Notification:** _____

As the responsible customer/owner of the above listed service address, I hereby notify the City of Lacey Utility Billing Department that I have sustained a water leak and to the best of my knowledge the leak has been repaired. I am requesting consideration of a leak adjustment under the City of Lacey Water Leak Adjustment Policy. I confirm that the above and any attached information is true and accurate. I also acknowledge and understand that only one water leak adjustment may be applied to my utility account in any five-year period.

Requester's Signature: _____ **Date:** _____

Please return the completed form with supporting documentation to:

City of Lacey
420 College Street SE
Lacey, WA 98503

For questions call (360) 491-5616