

**Leak Adjustment Request Form**

**General Guidelines**

All customers with 5/8 x 3/4 inch meters and all residential customers regardless of meter size who experience unusually high water usage with a corresponding spike in their water bill may be considered for a billing adjustment after completing this form within sixty (60) days of the date of the unusually high consumption and investigation and verification by Medina County Sanitary Engineers (MCSE) personnel that a leak was discovered and repaired. Please complete this form in its entirety and return to the MCSE Billing Department for processing.

**Leak Adjustment Guidelines**

- The MCSE will process no more than one (1) adjustment for water leaks every five (5) years.
- The customer's prior twelve (12) month average usage will be compared to the customer's usage during the leak period to determine excessive water usage to be adjusted.
- The water portion of the bill will be adjusted by charging for only fifty percent (50%) of the excess water used that exceeds the prior twelve (12) month average.
- Consumption must be at least two (2) times the average consumption.
- **Customers must submit a copy of their repair invoice/payment receipt from the company performing the work. The repair invoice/payment receipt should include the address, date, and nature of work. If self-repaired, the customer must provide a brief written explanation of the repairs performed and provide copies of invoice/receipt for repair parts.**
- All customers requesting a billing adjustment in accordance with these guidelines are required to pay their bill in full or make payment arrangements while this form is being processed.
- For customers with less than twelve (12) months water usage, the MCSE Billing Department will estimate the usage.
- It will take 1-2 billing cycles for any adjustments to post to your account.

**Customer Information**

Name: \_\_\_\_\_ Account Number: \_\_\_\_\_  
Phone Number: \_\_\_\_\_ Email: \_\_\_\_\_  
Service Address: \_\_\_\_\_ Mailing Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Leak Information**

Date Leak Detected: \_\_\_\_\_ Date Leak Repaired: \_\_\_\_\_

Provide a brief explanation of repairs below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Please Sign and Date Below**

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: _____	Denied: _____		
		_____ MCSE Representative Signature	_____ Date