**­**

******PLACE LOGO

HERE,

OTHERWISE
DELETE BOX

CUSTOMER SERVICE

www.cityofnewalbany.com

Phone: 812.948.5399

Fax: 812.948.5344

303 SCRIBNER DR

STE 101

NEW ALBANY IN 47150

New Albany Municipal Utilities

LEAK ADJUSTMENT INFORMATION

**PLEASE READ THIS SHEET ENTIRELY BEFORE SUBMITTING A LEAK ADJUSTMENT REQUEST**

**PLEASE CHECK OFF EACH ITEM BEFORE SUBMITTING THE REQUEST TO THE SEWER OFFICE. LEAK ADJUSTMENT REQUESTS WILL NOT BE ACCEPTTED WITHOUT PROOF OF REPAIR.**

LEAK ADJUSTMENT FORM FILLED OUT COMPLETELY \_\_\_\_\_\_\_\_\_\_\_

PROOF OF REPAIR INCLUDED \_\_\_\_\_\_\_\_\_\_\_

WATER CONSUMPTION HAS GONE BACK TO NORMAL \_\_\_\_\_\_\_\_\_\_\_

REGULAR PAYMENTS MADE \_\_\_\_\_\_\_\_\_\_\_

* PLEASE ATTACH PROOF OF REPAIR (RECEIPTS, PLUMBING INVOICES, ETC.) **LEAK ADJUSTMENTS WILL NOT BE ACCEPTED WITHOUT PROOF OF REPAIR**. IF YOU HAVE A LETTER FROM YOUR WATER COMPANY, PLEASE INCLUDE THAT AS WELL.
* ONCE YOUR WATER CONSUMPTION HAS GONE BACK TO NORMAL

YOUR LEAK ADJUSTMENT WILL BE PRESENTED TO THE SEWER BOARD.

* PAY WHAT YOUR “NORMAL” OR AVERAGE BILL WOULD BE WHILE WAITING FOR YOUR ADJUSTMENT TO BE PROCESSED. PENALITIES ASSESSED AS A RESULT OF YOUR LEAK WILL BE TAKEN INTO CONSIDERATION AFTER THE ADJUSTMENT IS GRANTED.
* NO ADJUSTMENTS SHALL BE MADE FOR TOILET LEAKS.

**ALL ADJUSTMENTS ARE SUBJECT TO THE APPROVAL OF**

**THE NEW ALBANY SEWER BOARD**