



Application for Water Leak Adjustment

Utility Account Number:	
Property Address:	
Head of Household:	
Spouse:	
Mailing Address:	
City, State, Zip:	
Telephone Number:	
Email Address:	

Date Leak was discovered	Date Leak was repaired

To qualify for the City of Everson “Water Leak Adjustment” the applicant will supply:

- A completed “Application for Water Leak Adjustment” from the City of Everson
- A copy of applicant’s repair receipt(s) for parts or a Contractor Invoice for repair

Adjustment for Water Leak will then be applied to the Utility Account.

I acknowledge that the supplied information is true and correct.

Signed _____ Date _____

Office Staff Only:

Approved by _____ Date _____