



APPLICATION OF LEAK REPAIR ADJUSTMENT

Application shall be made and submitted to the Customer Service Division. This **courtesy** form must be submitted within 60 days from the date of repair completion, with a limit to 2 considerations within a 12 month period. The customer will be required to provide receipt(s) for part(s) or billed invoice from plumber/company. Commercial repairs will require a license plumber. Plumber license must be submitted below. This application will be in a *90 day review process to determine approval or denial. **The customer will be responsible for billed usage, while the adjustment procedure is pending. Failure or refusal to pay any bill can result in disconnection of service and additional service charges.*** The Customer Service Division reserves the right to inspect all repairs pertinent to this application.

Form must be completed and the following attachment(s) provided: proof of work performed, billed invoice for repair from plumber/company and plumber license. Return to City of Beaumont, Customer Service Division, PO Box 3827, Beaumont, Texas 77704. This form must be signed by the person shown on the water billing records.

Account Name: _____

Service Address: _____

Phone Number (_____) _____ - _____

Cust ID _____ Loc ID _____

Date Plumbing Broke _____ Date Plumbing Repaired _____

Repaired By _____

Location and Type of Plumbing Repaired _____

I hereby affirm that the above information is true and correct.

Signature

Drivers License No.

Plumber License No.

Date
cy/rt _____ / _____ (Completed by in office staff) bme2/2020