

CITY OF RIDGELAND, MISSISSIPPI
WATER ADJUSTMENT REQUEST

DATE _____ ACCOUNT # _____

ACCOUNT NAME _____

SERVICE ADDRESS _____

HOME PHONE NUMBER _____

CELL NUMBER _____

WORK NUMBER/EXT. _____

I REQUEST AN ADJUSTMENT TO THE ABOVE REFERENCED ACCOUNT. I LOCATED A LEAK: (EXAMPLE: FRONT YARD NEAR WATER METER, MIDDLE OF YARD NEAR SIDEWALK, AROUND SPRINKLER HEADS, ETC) _____, ON OR ABOUT (DATE) _____.

I HAD THIS LEAK REPAIRED ON (DATE) _____.

NOTE: PLEASE ATTACH A COPY OF YOUR PLUMBER'S INVOICE OR COPIES OF RECEIPTS IF YOU MADE THE REPAIR YOURSELF. DOCUMENTATION OF THE REPAIR MUST BE ATTACHED TO THIS FORM IN ORDER FOR YOUR ACCOUNT TO BE ADJUSTED.

LEAKY FAUCETS OR TOILETS ARE NOT SUBJECT TO AN ADJUSTMENT

I DO CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND HAVE NOT WITHHELD ANY INFORMATION.

SIGNATURE

(OFFICE USE ONLY)

DATE RECEIVED _____
CLERK RECEIVING _____
POSTED ADJUSTMENT _____
DENIED ADJUSTMENT _____
REASON DENIED _____

CLERK INITIAL _____
CLERK INITIAL _____