



Athens-Clarke County Public Utilities Department
Water Business Office
Leak Adjustment Request Form

Account Number: _____

Service Address: _____

Customer Name: _____

Phone Number: _____

Email Address: _____

2. How did you become aware of the issue?

High water bill
 Water visible inside or outside the property
 Meter alert / notification
 Plumber or maintenance staff notified you

Other: _____

3. Please describe what happened

(Example: toilet running, pipe burst, irrigation issue, appliance failure, etc.)

4. Was the issue repaired?

Yes No (If no, the request cannot be reviewed until repairs are completed.)

5. Repair Information (if applicable)

Repair completed by a licensed plumber Plumber Verification Sheet attached

IMPORTANT: If repairs were completed by a licensed plumber, the Plumber Verification & Documentation Sheet and an itemized statement on company letterhead are required.

Date repaired: _____

Plumber / Company Name (if applicable): _____

6. Proof of Repair (attach one or more if available)

Plumber invoice or receipt
 Work order or maintenance record
 Photo(s) of repair
 Other documentation

If documentation is not available, please explain:

Eligibility & Timing (Important)

- One (1) adjustment per rolling 12-month period; covers no more than two (2) bills.
- Leak date is when unusually high usage was first identified in the system.
- Requests must be received within six (6) months of the repair date.

Acknowledgement (Required)

I certify the information provided is true and accurate.
 I understand adjustments are limited and not guaranteed.
 I understand usage billed prior to repair may not be fully adjusted.

Customer Signature: _____

Date: _____



Athens-Clarke County Public Utilities Department
Water Business Office
Leak Adjustment – Plumber Verification & Documentation Sheet

Account Number:

Service Address:

Customer Name:

Plumber / Company Information

Plumber / Company Name:

Plumber License Number:

Company Phone Number:

Company Email Address:

Required Documentation

The plumber must attach an ITEMIZED statement of repairs on COMPANY LETTERHEAD.

The itemized statement must include:

- What the problem was and when the repairs were made
- The length of time required to complete the repair
- The equipment and materials used in the repair

Receipts or statements that do not include the above information may result in denial of the request.

Important Notices

- Athens-Clarke County Public Utilities reserves the right to contact the plumber listed above and/or conduct a site visit for visual review of the repair(s) made.
- Requests for leak adjustment must be received no later than SIX (6) MONTHS from the repair date in order to be considered.

Plumber Certification

I certify that the information provided and attached documentation accurately reflects the repairs completed.

Plumber Signature:

Date: