

# Request for Credit

Date: \_\_\_\_\_

Account Number: \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

Reason for Request:

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**Attach copy of receipts from plumber or parts purchase for repair.**

**NOTE:** If paying a reduced amount of the billing that the leak affected, it may not cover the full bill amount after the adjustment is posted. Therefore, there could be an additional balance due on the billing statement following the credit. This can only be done on two consecutive bills with usage from leaks.

\_\_\_\_\_  
Signature