



**Water Rate Adjustment Request Form**

Customer Account #: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

Phone #: \_\_\_\_\_ Email: \_\_\_\_\_

Please explain the reason for the Water Rate Adjustment request (i.e cause, dates of occurrence, solution or repair performed, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

*Documentation of proof of the repair (receipts, paid invoices, etc.) must accompany this request form.  
Please include any information pertinent for your account review.*

**Customer Certification**

I certify that the information in this application is true to the best of my knowledge and that I have not received a water rate adjustment in the last seven (7) years. I understand that, if approved, I will pay for all water used at the lowest block water rate per the most current Rates and Fees Schedule as approved by the Board of Directors. I also understand that the water rate adjustment may only be applied for two consecutive billing cycles.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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**FOR OFFICE USE ONLY**

Request Received: \_\_\_\_\_

Approved: \_\_\_\_\_

Documentation Received: \_\_\_\_\_

Gallons Water Adjusted: \_\_\_\_\_ Final Bill Adjusted from \_\_\_\_\_ to \_\_\_\_\_