



# Harrisburg NC

*The right side of opportunity*

## WATER LEAK ADJUSTMENT

Send completed form and proof of repair to [customerservice@harrisburgnc.org](mailto:customerservice@harrisburgnc.org)

### ACCOUNT HOLDER DETAILS

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

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

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

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

### LEAK DETAILS

Leak Type:  Main Line/Pipe  Faucet Repair

Hot Water Heater  Irrigation

Toilet Repair  Other: \_\_\_\_\_

*The Town of Harrisburg Water Leak Adjustment Policy is designed to relieve the Town's residents from the impact of substantial water leaks. Only leaks in excess of \$50.00 will qualify for the program. An adjustment may be made using the following criteria:*

- Account must have water and sewer with the Town of Harrisburg
- The leak must not only be stopped but also repaired.
  - Proof of repair must be provided and repair must be confirmed by Town Staff.
  - Proof of repair can be an invoice from a plumber or a receipt where an item was purchased to fix the leak.
- Adjustment is based on a 12 month water and sewer average of the account. If there is less than a 12 month history, the existing time period will be averaged.
- The water and sewer charges for up to two affected billing cycles are eligible for reimbursement. If the leak occurred in more than two billing cycles, the months with the most beneficial adjustment to the account holder will be used.
  - Reimbursement will be calculated by using the average billing cycle usage from the previous 12 billing cycles. Water and sewer charges in excess of the previous year average will be provided as a statement credit.
- An account is eligible for a leak adjustment for one leak event per 12-month period. The Town will adjust up to two bills from the date of repair.
- The adjustment will be applied as a credit to the resident's account.

*The Town does not assume liability for a leak for notifying the account holder of a potential leak. It is still the property owner's responsibility to repair and prevent leaks.*

Account Holder Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

**"Calculation of Water/Sewer Adjustment" must be attached.**

Date Applied: \_\_\_\_\_ Adjustment Amount: \$ \_\_\_\_\_

Customer Service Supervisor: \_\_\_\_\_

Finance Officer: \_\_\_\_\_