

UTILITY ACCOUNT LEAK CREDIT REQUEST

201 West Sierra Avenue, Cotati, CA 94931  
(707)665-3631



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

Account Address: \_\_\_\_\_  
Street City State Zip Code

Phone Number: \_\_\_\_\_ Email Address: \_\_\_\_\_

Account Number: \_\_\_\_\_ Billing Period: \_\_\_\_\_

**DETAILS OF LEAK**

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

**THIS REQUEST DOES NOT GUARANTEE APPROVAL, NOR DOES IT CONSTITUTE A PAYMENT ARRANGEMENT**

Please submit your plumbing repair bill along with proof of payment for repairs. Credit is for water usage only. Adjustments are reviewed and approved or denied by the Director of Administrative Services and are based upon account history. Please note that one leak credit is allowed per service address every five years and will be applied to one billing cycle only.

**I understand that my application for a leak credit, if approved, will not be reflected until the next billing cycle.**

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

**Office Use Only:**

Application: Approved Denied By: \_\_\_\_\_ Initials Date: \_\_\_\_\_