BELLENUE
SHING

Date:_____

Account #_____

Request for Leak Adjustment

I, ______am requesting a one-time leak adjustment for water service at ______. I understand that this is a **one-time only** adjustment, for as long as

I own this residence. I have enclosed/attached a copy of the repair receipt and/or an explanation of what steps were taken to repair the leak (if I performed the repair myself). Receipts for any parts are enclosed/attached.

I understand that leak adjustments are granted only for repair of the main service line from the meter to the house. If for a rental property, the form must be signed by the owner.

Signed: _____

Contact #_____ Email:_____

Please scan/email this form to: <u>myutilitybill@bellevuewa.gov</u> (OR) mail to:

City of Bellevue – Utilities Department attn: billing customer service

PO BOX 90011

Bellevue, WA 98009-9011

Any questions, please contact Bellevue Utilities customer service at 425-452-6973