


## TOWN OF LIBERTY UTILITY ADJUSTMENT REQUEST FORM

Customers receive one regular adjustment per year for Excessive Use (if your bill is 1.5 times higher than your average). Only 2 months are able to be adjusted.

Customer can receive additional adjustments if they have a Catastrophic Water Leak  
Catastrophic Water Leaks Adjustments can be requested when your bill is 3 times your 6 month average.

Applicant Name: _____ Date: _____ First M Last		
Mailing Address: _____ Street Address City State Zip		
Service Address: _____ Phone: (____) _____ - _____		
Account Number: _____ Documentation Verifying Excessive Use Attached: YES NO	Form Completed by: Tenant x Owner x Representative (must have signed authorization)	
Reason for Request: _____ _____		
<p>I request an adjustment to my utility bill showing excessive use due to circumstances out of my control causing an abnormally high bill. I understand that excessive use is defined as metered water and/or sewer flow equal to or greater than one and one-half times the previous six (6) month average consumption. Anything above said consumption will be adjusted in accordance with the Utility Service Policies and procedures. I understand that this type of billing adjustment shall not be allowed more than one (1) time during any calendar year for the same customer for the same leak, regardless of service location.</p> <p>SIGNED: _____ DATE: _____</p>		
<p align="center"><b>- OFFICE USE ONLY -</b></p> <p>I certify that I fully explained the above customer that by executing this adjustment, the customer would not be eligible for another adjustment during this calendar year for the same leak. The following bill was adjusted by the amounts indicated below.</p> <p align="right">_____ Town of Liberty Staff Initials</p>		
Accepted (Initials / Date) _____ _____ _____	Request: _____ Approved _____ Denied _____ Signature of Director of Finance or Town Manager _____ Date _____	

Updated 8/2022