



UTILITY LEAK ADJUSTMENT FORM

City of Liberty Hill

Customer Name: _____ Address: _____

Account Number: _____ Contact phone #: _____

Date(s) of Leak: _____ Date of Repair: _____

Details: _____

Please return form by email to UtilityBilling@LibertyHillTX.gov, through mail to P.O. Box 1920, Liberty Hill, TX 78642, at our drop box (City Hall parking lot) or in person at City Hall, 926 Loop 332, Liberty Hill, TX 78642 during business hours of 8:00am to 5:00 pm, Monday through Friday.

To be eligible for a water leak adjustment, the customer must provide the following within sixty (60) days of repairing the Leak:

1. A copy of the repair receipt or paid-in-full invoice; and
2. Water account number; and
3. The property address where the repair took place; and
4. Range of high bill dates caused by the leak; and
5. The date and description of the repair

For leaks that have existed longer than sixty (60) days, adjustments will only be made for the sixty (60) days immediately prior to the repair.

If eligible, up to two (2) consecutive billing periods affected by the leak may receive an adjustment equal to \$100.00 per billing cycle, not to exceed 2 billing cycles.

An account may not qualify for a water leak repair bill adjustment if during the high-water volume period, the customer:

1. Failed to provide documentation that a leak was repaired
2. Filled a swimming pool
3. Established new landscape (new sod, new trees, shrubs, etc.); or
4. Received a water leak repair bill adjustment in the previous twelve (12) months

Customer Signature: _____ Date: _____

Printed Name: _____

For office use only:

Account No:	Meter No.:
Date of Review:	Leak Adj Approved: \$
Preparer's Signature:	Approval Signature:
Printed Name:	Printed Name: