City of Walla Walla
15 N 3rd Ave
Walla Walla WA 99362
Phone: 509-527-4423
ar@wallawallawa.gov

Leak Adjustment Request Form

The City of Walla Walla's Municipal Code allows for one Leak Adjustment credit in a 12 month period due to leaks that were unknown to the customer and not caused by the fault of the customer. Leak adjustments, if granted, are based upon your usage for the same period in the previous year. If the leak appears on more than one billing cycle, the leak adjustment is applied to the highest usage bill.

Please complete the fields below. If not completed in full, your request will be returned to you.

Customer Information:

Customer Name:_____

Account #_____

Service Location:_____

Mailing Address:_____

Email_____Phone:_____

Leak Repair Information:

Property owner occupied:____Yes____ No

Exact location of leak: _____

Date leak discovered:_____Date repaired:_____

Description of leak and repair:

_____

_____

_____

_____

PLEASE NOTE: Completion of this form does not guarantee an adjustment will be made on your account. The City does not reimburse for any parts or repair costs that were incurred because of the leak. A copy of the repair invoice or repair receipt and copy of the utility bill that shows the charges is attached. I have read, understood and agree with the leak adjustment requirements.

Signature_____Date:_____

COMPLETED APPLICATIONS MUST BE SUBMITTED WITHIN 60 DAYS OF THE BILL DATE IN QUESTION TO CUSTOMER SERVICE VIA EMAIL, MAIL OR IN PERSON.