GARRETT COUNTY DEPT OF PUBLIC UTILITIES
REQUEST FOR WATER BILL ADJUSTMENT

Name

Service

Address

Phone # Customer #

Date Leak Was Discovered: Date Repaired:

Location of Leak:

Did the water go back into the sewer system (leaking toilet/faucet)?

Has the leak been repaired? Brief Explanation:

CUSTOMER SIGNATURE DATE

PLEASE PROVIDE PROOF OF LEAK (i.e. receipts for repair, pictures, etc.).
IF NO DOCUMENTATION IS RETURNED WITH THIS FORM, THE ADJUSTMENT MAY NOT BE APPROVED.
PLEASE MAIL FORM & RECEIPTS/PICTURES TO:
Garrett County Courthouse
203 South 4th Street, Room 107A
Oakland, MD 21550

FOR OFFICE USE ONLY

Last 4 Qtrs Water Usage

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Billed Average Difference Rate Adj

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ADJUSTMENT POSTED BY DIRECTOR APPROVAL

DATE

DATE