

CITY OF SELMA
REQUEST FOR WATER LEAK ADJUSTMENT

NAME: _____ DATE: _____

ADDRESS: _____ PHONE: _____

NUMBER OF PERSONS IN FAMILY: _____ ACCOUNT NUMBER: _____

E-MAIL: _____

DATE OF REPAIR: _____ (CIRCLE ONE)
INSIDE OUTSIDE

DESCRIBE REPAIRS MADE: _____

PLEASE ATTACH COPIES OF ANY RECEIPTS AND RETURN TO:

CITY OF SELMA	Fax: 210-651-0385	mtankersley@ci.selma.tx.us
UTILITY BILLING		scaddell@ci.selma.tx.us
9375 CORPORATE DR	Ofc: 210-651-7800	
SELMA TX 78154-1250	Ofc: 210-651-7807	

REPAIRS WILL BE VERIFIED AND ANY ADJUSTMENT MADE IS BASED ON YOUR AVERAGE HISTORIC USAGE. **ALL LOST WATER (THE AMOUNT ABOVE YOUR AVERAGE HISTORIC USAGE) IS BILLED AT THE LOWEST BLOCK RATE.**

AN ADJUSTMENT WILL ONLY BE CONSIDERED UNDER THE FOLLOWING GUIDELINES:

1. The customer is only allowed to have ONE (1) adjustment every THREE (3) years.
2. No adjustments will be granted due to a leak in the irrigation system.
3. An adjustment will only be considered if the water usage exceeds 5X the customer's average usage.
4. Receipts of repair must be turned in within 30 days of the repair.
5. A leak must be repaired within 30 days of acknowledging a leak.
(ex: a toilet has been running for weeks/months and customer has neglected to fix)

WHILE YOUR REQUEST IS BEING PROCESSED- Customers are responsible for the **ENTIRE AMOUNT DUE** on their utility bills within the normal payment period. If this does not occur the customer is subject to all current and applicable collection and termination of services for delinquent account.

Customer Acknowledgement: _____