



CITY OF ORTING

110 TRAIN ST. SE, PO BOX 489, ORTING WA 98360
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www.cityoforting.org

UTILITY BILLING ADJUSTMENT REQUEST

Water Leak Adjustment
Was leak repaired? Yes No Date: Documentation? Yes No
(Please attach)

Penalty Removal / Processing Fee Removal

Other

Account #: Meter #:

Name: Phone #:

Service Location:

Mailing Address (if different from service location)

Describe in detail the reason for the utility billing adjustment request. If water leak adjustment is requested please describe the nature & location of the leak.

Multiple horizontal lines for describing the reason for the utility billing adjustment request.

Water Leak Adjustment only:

The intent of City inspection of water leak repair(s) is to assist the utility customer in fully exploring leaks and/or other causes for excessive water usage. The City will adjust your current water billing based on the previous 12 months average usage. However, without inspection the City may not adjust any future billings.

- I have repaired the water leak, located at service address listed above, without City Inspection.
I request inspection of repair

Signature of Owner Date

FOR CITY USE ONLY

Inspected by: Date:

Adjustment: Denied Forward to Clerk/Treasurer or designee for further review

Recommendation:

Adjustment Amount: (Please attach adjustment worksheets)

Approved by: Date: