City of Woodland

FINANCE DEPARTMENT 300 FIRST STREET WOODLAND, CALIFORNIA 95695 (530) 661-5831
BILLING & COLLECTIONS Fax: (530) 661-5848

LEAK ADJUSTMENT APPLICATION

ACCOUNT #_____

Address:_____
Service Address

_____
City, State, Zip Code

The City, in order to encourage prompt repairs of leaking pipes and fixtures, will make allowances and adjustments at staff discretion upon evidence of repairs. **Repair receipts or invoices are required**. Upon approval, adjustments will be made from the consumption portion only, will be credited to the Utility Account and will not exceed a 6-month time period. (Adjustments will not be made if ALL required paperwork is not submitted.)
Please write a brief description below of the leak, damage and repairs made to the property;

_____

_____

_____

_____

_____

_____

_____

_____

_____

_____ _____
Signature of Legal Owner Date

_____ _____
Print Legal Owner Name Owner Phone #

_____
Email Address

Abnormal usage due to leak: Start date _____ End date: _____

(These dates will be filled out by City of Woodland staff)

The consumer has sole control of the amount of water drawn through the water meter and is responsible for the maintenance and repairs of the pipes / fixtures beyond the water meter.