



NORRIS WATER COMMISSION
P.O. Box 1090, 20 Chestnut Street
Norris, TN 37828 (865) 494-7645

Request for Water Leak Adjustment Form

Today's Date: _____

CUSTOMER INFORMATION:

Name of Account: _____

Acct. Number: _____ Telephone: _____

Service Address: _____

City: _____ TN: _____ Zip Code: _____

LEAK REPAIR INFORMATION:

Date Leak Discovered: _____ Leak Location: ___ Inside Residence ___ Outside Residence

Date Leak Repaired: _____

Description of Leak: _____

PLEASE NOTE: Completion of this form does not guarantee an adjustment will be made to your utility bill. All adjustments are issued based on your average usage from previous account history and are credited at a reduced rate. Once the review is complete, you will receive notification of results from the Billing Office.

Please return the completed form along with a copy of repair bill to Norris Water Commission, 20 Chestnut Dr., Norris, TN 37828.

Signature: _____ Date: _____

For office use only: Date Received: _____

Water Bill Original Amount: \$ _____ Month of leak: _____

Adj. Average Usage: _____ Leak Credit Amount: \$ _____

Approval Date: _____ Denial Date: _____

Approval Signature: _____ Date: _____