

## REQUEST Leak Adjustment

Billing and Collections Division | Financial Services Department 105 E. Corbin St., PO Box 429, Hillsborough, NC 27278 919-296-9450 CustomerService@hillsboroughnc.gov www.hillsboroughnc.gov

Please allow 10 business days from this request's receipt for processing. Incomplete applications will be delayed. Proof of repair is required before any adjustments can be made.

**Leak Adjustment Eligibility:** A leak adjustment for non-beneficial use of domestic water may be granted by the Town of Hillsborough if no adjustments have been granted within the current calendar year and it is deemed that the usage is unusually large.

**Adjustment Procedure:** The average usage for the previous six-month period shall be subtracted from the total actual usage. A credit shall be calculated on the difference using the prevailing usage of the account. All qualifying adjustments will be applied to the account as a credit. Leak adjustment requests must be submitted within three months of the billing date of the bill to be adjusted.

Past Due Bills: Accounts that have a past due amount may be subject to disconnection of service.

Account Holder's Name:	
Service Address:	
Billing Address:	
Phone Number:	Email:
Explanation of the leak and steps taken to repair: _	
Leak Start Date:	Date Leak Repaired:
A good faith payment of	was paid by the due date.
, -	d regulations of the Town of Hillsborough, County of Orange, o my request) and certify that the above information is true
Account Holder's Signature:	Date:

Last revised: January 2022