

SANTO SUD LEAK VARIANCE/CERTIFICATION OF WATER LEAK REPAIR

Santo SUD
13497 S F.M.4
Santo, TX 76472
940-769-4594

Account Number: _____

Account Holder Name: _____

Billing Address: _____

Contact Phone Number: _____

Contact Email: _____

Date Leak Discovered: _____

Where on property leak occurred: _____

Company that repaired leak: _____

Company Address: _____

Company Phone Number: _____

Date Leak was Repaired: _____

Cost of Repairs: _____

A copy of the Invoice or Sales Receipt must accompany this form.

Certification:

I certify this request for a leak adjustment to my Santo Special Utility District bill is true and factual.

I understand granting of a leak adjustment will be in compliance with the District's Service Policy.

Signature: _____

Date: _____

Leak Adjustment Policy. In the event that the amount of a customer's monthly bill is higher than normal due to leakage, the customer may submit a written leak adjustment request to the District to be billed for water used at the minimum rate plus the amount of one month's average bill for the last twelve (12) months. If a leak adjustment applies, the excess usage for the period will be billed at the District's minimum rate. The District may grant an adjustment if each of the following apply:

- A. The amount of excess water usage reflected in the contested bill must be at least two (2) times the average monthly usage for that customer.
- B. The customer must submit documentary evidence that the leak has been repaired, such as a statement from a plumber and/or receipt for parts purchased to repair the leak
- C. The Customer has not requested a leak adjustment during the previous twelve (12) months regardless of the number of meters serving the customer's property or properties.
- D. Upon discovery of leak, contact Santo Utility District within next business day