**Solicitud de Ajuste de Factura**

[ ]  Fuga [ ]  Relleno de piscina

**Soy un(a):**  [ ]  Dueno/a [ ]  Rentero/a

|  |  |  |  |
| --- | --- | --- | --- |
| **Fecha** |  | **Numero de cuenta:** |  |
| **Nombre de dueno/a:** |  |
| Nombre de Rentero (si aplica) |  |
| **Direccion de servicio:** |  |

|  |  |  |
| --- | --- | --- |
| Fuga |  | Relleno de Piscina |
| Fuga verificada por: |  | Fecha del relleno de piscina: |  |
| Favor de agregar copia del bill de reparacion verificado por un plomero licenciado | Marca de inicio: |  |
|  | Marca final: |  |
| Empleado de Obras Publicas: |  |

**Ajustes solo se aplican a cargos de drenaje.**

Clientes son facturados ala tarifa estandar de 1,000 galones basado en las marcas del metro. Si un ajuste se a hecho debido a una fuga o un relleno de piscina, los clientes seran cobrados un promedio del uso de los ultimos 11 meses

**Verification of Leak**

Before this policy can apply, a licensed plumber, the Town Manager or his/her designee must verify the proposed lead did not enter the Town’s sanitary sewer system.

**Pool Filling:**

In order for an adjustment to apply for filling a pool the customer must inform the Town prior to filling the pool and allow time for the Town to read the beginning and ending reading.

Signature of Customer: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Town Manager (or designee)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_