



LEAK ADJUSTMENT APPLICATION FORM

Greater Vernon Water

LEAK ADJUSTMENT APPLICATION FEE: \$50.00 PER THE CURRENT GREATER VERNON WATER RATES IMPOSITION BYLAW, WILL BE CHARGED TO THE UTILITY ACCOUNT OF APPROVED LEAK ADJUSTMENT APPLICATIONS.

CONDITIONS:

1. Where a customer can prove by a plumber's or other pertinent receipt that a water leak in excess of 30 cubic metres has been repaired, the customer may complete a Leak Adjustment Application and submit the application fee;
2. The Manager - Greater Vernon Water or designate may provide a credit volume equal to half of the volume of the calculated leak;
3. The credit volume of the leak shall be calculated by using the meter data provided by the Encoder Receiver Transmitter (ERT) and/or by subtracting the historical average consumption of the billing quarter from the actual consumption;
4. Leak adjustments will be limited to two quarters (including the quarter the leak was repaired). Each property is eligible for adjustment every 36 months; and
5. The Regional District's representative has the right of access to inspection to determine if the leak was repaired.

DATE:	ACCOUNT #:	PHONE:
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NAME ON ACCOUNT:

NAME OF APPLICANT (if not property owner):

ADDRESS OF PROPERTY APPLIED FOR:

MAILING ADDRESS (if different from above):

DATE LEAK WAS NOTICED:	DATE LEAK WAS REPAIRED:
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ARE YOU THE PROPERTY OWNER? <input type="checkbox"/> Yes <input type="checkbox"/> No	DO YOU RENT / LEASE THIS PROPERTY? <input type="checkbox"/> Yes <input type="checkbox"/> No
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Describe the reason(s) for the requested leak adjustment on back of form and attach supporting documentation.

THE OWNER IS REQUIRED TO PROVIDE THE FOLLOWING:

1. Attach a copy of the repair invoices or receipts. If no receipts are available, attach a detailed outline of the work performed in writing by the person responsible for the repair.
2. Attach a letter of explanation describing what was repaired (see reverse).
3. In order to process your leak adjustment in a timely manner, please complete form in full or your request will be returned to you.

LEAK ADJUSTMENTS WILL NOT BE CONSIDERED FOR THE FOLLOWING:

1. Above-ground piping or fixtures and/or where the leak is visible and is not covered by housing, walls, or other permanent structures;
2. Leaks caused by frozen piping or fixtures that are not sufficiently protected from frost or freezing;
3. Broken sprinkler heads or above-ground sprinkler systems;
4. Rental properties;
5. Routine dripping or leaking faucets, or water leaking commodes/toilets;
6. Any type of faulty fixture with the exception of catastrophic breaks that were fixed immediately; and
7. New construction for a period of one year.

Please read and initial each item:

- _____ There have been no recent plumbing repairs which caused the leakage for which an adjustment is sought.
- _____ I am personally familiar with all of the matters of fact stated in this application and swear that they are made on my personal knowledge and that they are each true and correct.
- _____ I acknowledge that a leak adjustment application will take a minimum of 3 weeks to process from date received.

SIGNATURE OF APPLICANT(S):	DATE:
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**** FORM CAN BE SUBMITTED VIA EMAIL (utilities@rdno.ca), FAX (250-550-3701) or MAILED ****

OFFICE USE ONLY

APPROVED

NOT APPROVED

Signature

Print Name

Date

