



P.O. Box 17089 • Pensacola, Florida 32522-7089
9255 Sturdevant Street • Pensacola, Florida 32522-7089

ONE-TIME FULL LEAK ADJUSTMENT

AFFIDAVIT

I, _____, swear or affirm under penalty of perjury that I am requesting to use my one-time full leak adjustment at this time. I had a leak at the following address:

ECUA Account No. _____ which caused sudden and accidental water loss.

The leak was discovered in the following area:

on _____ and repaired on _____.

Since that repair, the water usage has returned to its normal level.

I understand that by electing to take this adjustment at this time, no one listed on this account will ever be able to take any other full leak adjustment in their lifetime (although I/we may be eligible to take a partial/final leak adjustment on a single occasion at some point in the future). I also understand that my bill must be paid as scheduled and that this account will be monitored for reduced water usage, as evidence that the above-described leak has in fact been repaired. I understand that once ECUA has received this Affidavit and evidence of reduced water usage, my adjustment will be processed. **I further understand no one listed on this account will ever again be afforded another full leak adjustment.**

***** If repairs were made by a licensed plumber a Repair Receipt or Statement of the licensed plumber is Required for Adjustment Approval. *****

Customer Signature

Daytime Phone Number

Date

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization, on this ____ day of _____, 2022, by _____ who ☐ is personally known to me or ☐ has produced _____ (type of identification) as identification.

Seal

NOTARY PUBLIC

Printed name

My commission expires: _____