



One-Time Full Leak Adjustment Agreement

I, _____, am requesting to use my one-time full leak adjustment at this time. I had a leak at the following address: _____, Account No. _____, which caused considerable 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 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 form, repair receipts **or** affidavit of repair 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.

****Repair Receipts or Affidavit of Repair Must Be Attached for Adjustment Approval.**

_____ Customer Signature _____ Daytime Phone # _____ Date

Please Return To:
ECUA
P O Box 17089
Pensacola, Florida 32522-7089

(Rev. 4/13)
(Rev. 3/30/17)
(Rev. 4/5/17)
(Rev. 5/8/17)