

Town of Pilot Mountain • Public Utilities

124 West Main Street, Box 1 • Pilot Mountain, NC 27041 (P) 336.368.2248 • (F) 336.368.9532 • www.pilotmountainnc.org

WATER/SEWER BILL ADJUSTMENT REQUEST FORM

This form is not a guarantee that a credit will be applied to your utility bill. You will be notified by phone or letter if the request cannot be granted or if additional information is needed. Only one adjustment will be allowed during any 12 month period and only after any leaks have been repaired and consumption returns to normal. Adjustments can only be applied to one billing period. Requests must be received within 90 days of the billing date.

Name on Account		Account Number			
			7.555 5.115.115.5		
Service Address		Contact Phone Number			
Type of Leak					
☐ Underground Pipe ☐ Irrigation ☐ Toilet ☐ Extreme High Use ☐ Other					
Date(s) Leak Occurred		Date Leak	Date Leak Repaired (if applicable)		
Copy of repair invoice attached (if repaired professionally) Copy of repair receipts attached (if repaired by owner/tenant or ag				☐ Yes ☐ No agent) ☐ Yes ☐ No	
Brief description and action taken to repair (continue on second page if needed):					
By signing below, you are authorizing the Town of Pilot Mountain to process an adjustment on the water					
	-	-	_	bove statements are true and accurate to will be the only adjustment authorized in	
any twelve (12) month period on your account which may result in staff denying a future adjustment					
even if the future adjustment is for a higher amount. Please attach copies of plumber's statements, receipts or statement of work completed when mailing or faxing this document.					
Account Holder Signature:				Date:	
** OFFICE USE ONLY **					
Received:	By:	<u> </u>		te of Last Adjustment:	
Adjustment	Adjustment	Customer C	1 Approved	Approval Signature:	
Calculated (attached)	Applied		1 Denied		
Staff Notes:					