

Elyria City Hall 131 Court Street, Suite 102

Elyria, Ohio 44035

Phone: (440) 326-1570 **Fax:** 440-326-1588 www.cityofelyria.org

REQUEST FOR WATER LEAK CREDIT

In the event of a documented loss of water due to a leak or other unforeseen circumstance on the customer side of the meter, resulting in more than the average consumption for the account, the customer may apply for a credit.

A Credit may be given under the following conditions:

- (a) Proof of the repairs has been presented within ten (10) business days.
- (b) The account holder has reported the leak to the Utilities Office on the water leak credit form.
 - (c) The account holder presents proof of such loss to the satisfaction of the City, with a brief description of leak and repair done. (Provide on back of Form).
 - (d) A credit has not been rendered within the past two (2) years.

SERVICE ADDRESS:	
(Street Address)	(City, State and Zip code)
ACCOUNT HOLDER (NAME):	
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	☐ REALTOR
Telephone Number ()Cell Phone Number ()	
Email Address:	
Have you had a previous account with City of Elyria different than the service address?	
(If different than Service Address) (City, State and Zip code)	
Credit Calculation Methodology: Determine the average monthly consumption	
immediately preceding the leak (or period of time as an account holder, if less than	_
monthly consumption from the consumption in dispute. Credit the customer fifty p	
between the average consumption and the consumption in dispute. (Water and sewe	er).
In consideration for receiving utility service from The City of Elyria at the above location, I hereby acknowledge to the consideration for receiving utility service from the City of Elyria at the above location, I hereby acknowledge to the consideration for receiving utility service from the City of Elyria at the above location, I hereby acknowledge to the consideration for receiving utility service from the City of Elyria at the above location, I hereby acknowledge to the consideration for receiving utility service from the City of Elyria at the above location, I hereby acknowledge to the consideration for receiving utility service from the City of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the above location in the city of Elyria at the city of E	owledge responsibility for payment of
service billings. I will continue to make payments on my utility account until a possible leak credit is det	
payment by the indicated due date is required to prevent interruption of service. You are responsible for u	itility service until your account is closed.
I understand that The City of Elyria is not responsible for water damage to this property or its conten	ts. In consideration for having utility
service initiated/restored at the above address, I agree to ensure that all water service facilities (sink and	
are turned off: or that the responsible account holder or designee will be present to check for leakage. We shut off valve, if applicable.	e recommend that you turn off your private
Once a water leak credit amount has been determined, I understand that I will be required to have a Gene	ral Release Form signed and notarized. This
Form will be mailed to me at the above address. No credit will be applied to an account without the Form	n being returned to EPU.
***CREDITS WILL NOT BE PROCESSED WITHOUT PROPER DOCU	JMENTATION**
	Date:
Account Holder Signature	
	_
Property Owner/Agent Signature	Date:
1 Topolty Owner/Agent Signature	NL: V . U3/41