

LEAK ADJUSTMENT POLICY

The Clay Roane PSD will consider a request for a leak adjustment in accordance with section 6.4.3.a of the Public Service Commission's Rules and Regulations for the Government of Water Utilities. A leak adjustment will reflect the Incremental cost of producing water as set forth in the District's approved tariff.

Clay Roane PSD is not responsible for any loss of water once it has gone through the meter or for damage to personal property a leak may have caused.

Clay Roane PSD will issue a leak adjusted billing only after the customer has met the-following requirements:

- A.** The leak must be non-preventable and located in the customers service line between the District's meter setting to the required shut off valve at the inlet of customer foundation. Leak adjustments will not be given for unusual usage due to leaking commodes, dripping faucets, malfunctioning appliances and similar situations that would be easily noticed by the customer.
- B.** The customer must contact Clay Roane PSD within five (5) days following discovery of the leak to make a written request for a leak adjustment using form provided by the District. ([Appendix E](#))
- C.** The customer is responsible for repairs to the customer's service line and all repairs must meet Clay Roane PSD service connection requirements. (Appendix D) All repairs must be inspected and approved by a duly authorized representative of the Clay Roane PSD. If, upon inspection, repairs are determined to be unsatisfactory, the customer must repair the customer service line to standard before water service can be restored and/or an adjustment can be made to the water bill.
- D.** All leaks that have been discovered shall be repaired as soon as possible and verification of the repair must be submitted to the District. A customer must maintain his service pipe in good condition and free from all leaks and defects, at his expense. A customer's failure to comply with this rule may result I termination of service pursuant to the Public Service Commission Water Rules.

After the customer has met the requirements and the leak adjustment form has been approved, a recalculated bill will be issued using the leak adjustment rate found in the Clay Roane PSD's tariff.

If the customer is unsatisfied with the adjustments to the water bill, they may take the dispute to the Public Service Commission in the form of an informal complaint.

This policy shall be maintained in the Clay Roane PSD office for inspection by the public and shall be applied in a nondiscriminatory manner to all Clay Roane PSD customers.

Clay Roane PSD shall grant only one (1) leak adjustment for only (1) bill, within any twelve (12) month time period. If it is determined that the leak occurred between two billing cycles and charges occurred on both water bills, only the largest bill will be adjusted.

Penalty charges will still apply to leak adjusted bills.

In the case of a customer requesting a deferred payment plan due to a large bill caused by a leak, all terms of the deferred payment plan policy must be met by the customer to avoid penalty charges on current bills.

CLAY-ROANE PUBLIC SERVICE DISTRICT

LEAK ADJUSTMENT REQUEST FORM

CUSTOMER _____ ACCOUNT # _____

ADDRESS _____

SERVICE LOCATION (If other than above) _____

DATE LEAK DISCOVERED _____ DATE REPAIRED _____

To qualify for a leak adjustment, customers must show proof of the leak repairs. Current receipts for parts or billing invoice for repair service must be submitted with this form, along with photos showing the leak repair and parts used. All repairs must comply with Clay-Roane PSD service specifications.

LOCATION OF LEAK _____

HOW LEAK WAS REPAIRED _____

WHO MADE THE REPAIRS _____

I, the undersigned customer, do certify that the above information is true and accurate, and I request an adjustment to the water bill under the provisions of the Clay-Roane Public Service District's Leak Adjustment Policy.

I also understand that it is the policy of Clay-Roane PSD to grant only one (1) leak adjustment per customer, per calendar year.

Customer Signature Date

*****OFFICE USE ONLY*****

Normal Usage _____ 200% Average Usage _____

Usage With Leak _____

Is the leak source eligible for adjustment?	YES	NO
Was the request received on time?	YES	NO
Was adequate proof provided?	YES	NO
Were material requirements followed?	YES	NO
Does the customer qualify for adjustment?	YES	NO

☐ APPROVE Adjustment Amount \$ _____ Date _____

☐ DENY Reason for Denial _____