

CITY OF HAYSVILLE, KANSAS

200 W. GRAND AVENUE - P.O. BOX 404 - HAYSVILLE, KS 67060 (316) 529-5900 - FAX (316) 529-5925 - WWW.HAYSVILLE-KS.COM

ADJUSTMENT OF WATER BILLS

Date		Acc	count Number
Ι,	(Name)	_, owner / renter of residence a	ıt
	(Address)	hereby ask for an adjustment o	f
my	mywater bill because of a leak. (Month)		
The water leak at the above a plumber bill / receipt was \$	ddress was repaired on(pl	ease attach a copy of the invoic	. The amount of the receipt).
 Water Service Line (red / Replaced (Circle One) Water Meter to House): Repaire y):		<u>.</u>
Daytime Phone		Owner/Renter Signa	ture
	Office Use On	lv	
Total last year's usage, if appl Present usage	rage		
Plumber	License #	Repair Order No.	Permit: Yes/No
I have reviewed documentation	on submitted for the leak at the a the water bill adjustment policy	bove address and an adjustmer	nt to their water account
		Water Department	
Consumer was contacted with	n the results on:		