Public Utilities

3200 Mason-Morrow-Millgrove Road Mason, OH 45040

P: 513.229.8570 F: 513.229.8571



Sewer Adjustment Request

This form must be completed prior to reviewing any sewer credit requests. Adjustments will be evaluated only when corrective action is taken within (15) days of the date of the bill when the excessive consumption was initially billed. The account holder must submit a request form within sixty (60) days of the bill for which adjustment is requested. Adjustments are limited to once in a twelve (12) month period and will reflect only the single billing period of excessive use. Sewer credits will be evaluated on a case by case basis and leaks clearly must not have entered the sanitary system. A minimum of two bills from the months prior to the leak as well as the month of the excessive use must be submitted. These bills should be from the official billing agency. Documents of estimates and repair bills must be submitted as well as a record of water shut-off for service line repairs from the meter to the property. Additional information may be required. This request form and documents can be uploaded to the Public Utilities Dropbox account or mailed to the address at the top of this page.

CUSTOMER INFORMATION				
Name:	Email:			
Address:				
City:	State:	Zip:	Telephone:	
Service Address (if different than above):				
Provide a detailed description of the prob	lem. Please inclu	de date, locatio	n and person or company who performed	the repair:
repair invoice and/or receipts REQUEST SUBMITTAL CHECKLIST: completed adjustment request form bills two months prior to increase bill to be adjusted repair invoice and/or receipts				
	owing: leaks cause ing lines, undeterm aucets, etc.), leak completion of rep	ed by a third par nined use of wate y or running out airs.	ty, negligent use of water, failure to identifer, broken or leaky water lines that enter sa side faucets.	
Signature:			Date:	