

# The Utilities Board of Rainbow City

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## CUSTOMER ADJUSTMENT REQUEST

Date: \_\_\_\_\_ Account #: \_\_\_\_\_ Name: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_

Nature of Leak: \_\_\_\_\_  
(Underground, burst pipes, etc)

Reason for request: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Has leak been repaired? \_\_\_\_\_ Date Repaired: \_\_\_\_\_

By Whom? \_\_\_\_\_

Do you have repair receipts? \_\_\_\_\_

Customer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

### **For Office Only**

Amount of Adjustment:

Water: \$ \_\_\_\_\_  
Sewer: \$ \_\_\_\_\_  
Tax: \$ \_\_\_\_\_  
Garbage: \$ \_\_\_\_\_  
Penalty: \$ \_\_\_\_\_  
Miscellaneous: \$ \_\_\_\_\_  
**Total** \$ \_\_\_\_\_

Amount Billed: \$ \_\_\_\_\_  
Adjustment: \$ \_\_\_\_\_  
Amount Due: \$ \_\_\_\_\_  
Credit or Debit