

CITY OF BRYANT WATER AND WASTEWATER UTILITIES MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: September 2022

Total Number of Request for Adjustment		Total Number of Adjustments Approved	
Highest Bill Adjusted		Lowest Bill Adjusted	
Total Gallons Adjusted		Total Cost of Adjustments	

DETAILS

Customer Name	<u>Randy Walker</u>			Customer Address	<u>2200 Carywood</u>
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	<u>9.22.22</u>
<u>2 months</u> Amount of Bill:	<u>*662.99</u>			Usage:	<u>372</u>
Average Bill:	<u>*54.71</u>			Three Month Average Usage:	<u>29</u>
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>*259.04</u>			Adjusted Bill Amount:	<u>*405.95</u>
Customer Name				Customer Address	
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	
Amount of Bill:				Usage:	
Average Bill:				Three Month Average Usage:	
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:				Adjusted Bill Amount:	
Customer Name				Customer Address	
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	
Amount of Bill:				Usage:	
Average Bill:				Three Month Average Usage:	
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:				Adjusted Bill Amount:	
Customer Name				Customer Address	
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	
Amount of Bill:				Usage:	
Average Bill:				Three Month Average Usage:	
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:				Adjusted Bill Amount:	
Customer Name				Customer Address	
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	
Amount of Bill:				Usage:	
Average Bill:				Three Month Average Usage:	
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:				Adjusted Bill Amount:	

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9-26-22 Service Account No.: 624800-000
 Customer Name: Randy Walker Home Phone: _____
 Service Address: 2200 Canyonwood Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9-22-22

Description of Cause of Leak (faucet, toilet, underground, etc.):

Leak in front yard

Explanation of how leak was repaired: *Attach plumbing invoice or receipts for repair parts*

Sworn Statement:

I _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

FOR OFFICE USE ONLY							
2 months		Amount of Bill:	\$662.99		Usage:	372	
		Average Bill:	\$54.71		Three Month Average Usage:	29	
		Adjustment Approved:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Approved By:		
		Amount of Adjustment to Sewer Bill:	\$257.04		Adjusted Bill Amount: \$405.95		
Payment Plan	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.	

[Signature]
 Customer Service Manager

KC Roofing & Repair

All of your roofing
And minor or major
repair needs!!!

Acct#
024800-000

Kunta Coleman -Owner
Little Rock, AR
(501) 612-2919

Date of Quote: 09/22/2022
Customer Name: Randy
Walker
Customer Address:

Subject Property Address:
2200 Carywood, Bryant
AR 72022
Customer Number:
File Quote Number:

ALL Invoices are Good for 30 days

Job Description	Estimated Material Cost	Labor Cost	Total Cost
Repaired Leak in the front Yard of the above property			\$750.00
TOTAL			\$750.00
<input type="checkbox"/>	Customer WILL provide materials.		
<input checked="" type="checkbox"/>	Customer WILL NOT provide materials.		

IMPORTANT NOTICE

50% is due prior to job being started
AND the remaining 50% of the
balance is due IMMEDIATELY upon
completion of ALL work by
contractor(s).

Customer Signature

Kunta Coleman (Contractor)

024800-000
501-247-5377