

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: March 2023

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	Korn: Whipple	Customer Address	2202 Byron
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/23
3 months Amount of Bill:	\$618.52	Usage:	341
Average Bill:	38.84	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$230.06	Adjusted Bill Amount:	\$387.76
2 months Customer Name	Clarence Sanders	Customer Address	1519 Rodeo
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/23
Amount of Bill:	\$379.96	Usage:	208
Average Bill:	71.90	Three Month Average Usage:	38
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$113.38	Adjusted Bill Amount:	\$262.58
Customer Name	Peggy Murn's	Customer Address	9511 Hwy 5 N #20
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	2/23
3 months Amount of Bill:	\$847.14	Usage:	475
Average Bill:	97.55	Three Month Average Usage:	55
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$266.53	Adjusted Bill Amount:	\$580.61
Customer Name	Terry Steed	Customer Address	3412 Dearbun
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	2/23
1 month Amount of Bill:	\$326.10	Usage:	181
Average Bill:	40.61	Three Month Average Usage:	21
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$138.56	Adjusted Bill Amount:	\$187.54
Customer Name	Jamie Harris	Customer Address	3009 Stevens
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/23
3 months Amount of Bill:	\$1,274.47	Usage:	675
Average Bill:	54.71	Three Month Average Usage:	29
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$509.19	Adjusted Bill Amount:	\$765.28

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SUMMARY

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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	Grant Heston			Customer Address	5306 Buckingham
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
3 months Amount of Bill:	\$656.56			Usage:	377
Average Bill:	\$120.			Three Month Average Usage:	64
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$160.19			Adjusted Bill Amount:	\$496.37
Customer Name	Ashleigh Dezonica			Customer Address	3000 Ozark
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
2 months Amount of Bill:	\$586.25			Usage:	326
Average Bill:	\$82			Three Month Average Usage:	45
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$204.36			Adjusted Bill Amount:	\$381.89
Customer Name	Pamela Bullock			Customer Address	2804 Lynnet
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
3 months Amount of Bill:	\$651.50			Usage:	362
Average Bill:	\$125			Three Month Average Usage:	68
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$136.80			Adjusted Bill Amount:	\$514.70
Customer Name	Kaylee Turnbough			Customer Address	111 N. Vine
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
2 months Amount of Bill:	\$466.98			Usage:	241
Average Bill:	\$88			Three Month Average Usage:	37
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$144.60			Adjusted Bill Amount:	\$322.38
Customer Name	Clayton Law			Customer Address	2502 Sprinkhill
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	
3 months Amount of Bill:	\$565.90			Usage:	538
Average Bill:	\$32			Three Month Average Usage:	28
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$240.83			Adjusted Bill Amount:	\$325.07

CITY OF BRYANT WATER AND WASTEWATER UTILITIES MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

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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	Stacy Baker			Customer Address	2527 Huron Blvd
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
1 month Amount of Bill:	* 321.21			Usage:	304
Average Bill:	* 55			Three Month Average Usage:	53
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	* 133.15			Adjusted Bill Amount:	* 188.06
Customer Name	Alvin Smith			Customer Address	3218 Stony Pt
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	3/23
3 months Amount of Bill:	* 1,148.75			Usage:	977
Average Bill:	* 55			Three Month Average Usage:	29
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	* 770.73			Adjusted Bill Amount:	* 978.02
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: 3/2023 Service Account No.: 032544-000
 Customer Name: Korri Whipple Home Phone: _____
 Service Address: 2202 Byron Dr. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/2/23

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

Water Heater Leaking

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									
<u>3 months</u>		Amount of Bill:		<u>\$618.52</u>		Usage:		<u>341</u>	
		Average Bill:		<u>\$38.84</u>		Three Month Average Usage:		<u>20</u>	
		Adjustment Approved:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Approved By:			
		Amount of Adjustment to Sewer Bill:		<u>\$230.76</u>		Adjusted Bill Amount:		<u>\$387.76</u>	
Payment Plan		Yes <input type="checkbox"/> No <input type="checkbox"/>		Payment Period		3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>		Payment Amt.	

[Signature]
Customer Service Manager



Invoice #138767

Mar 02 2023

Acct # 032544-
000

BILL TO

Korri Sutton

2202 Byron Dr Bryant, AR 72022

alldrains70@gmail.com

FROM

Greg Connor -Master Plumber lic #6240-Business lic #25711

3207 Meadowlake Dr.

Bryant, Ar 72022

alldrains70@gmail.com

+1 5019099172

435-313-1404

INVOICE ITEMS

AMOUNT

Installed new water heater to replace leaking water heater.

\$535.00

\$535.00

PAYMENT DUE MAR 02, 2023

MESSAGE

30 day warranty on parts & labor. Thanks for your business!

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/2023 Service Account No.: 026062-000
 Customer Name: Clarence Sanders Home Phone: _____
 Service Address: 1519 Rodeo Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2/2023

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

Toilet Leaking

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							
<u>2 months</u>	Amount of Bill:	<u>\$375.96</u>			Usage:	<u>208</u>	
	Average Bill:	<u>\$71.90</u>			Three Month Average Usage:	<u>38</u>	
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By: _____			
	Amount of Adjustment to Sewer Bill:	<u>\$113.38</u>			Adjusted Bill Amount:	<u>\$262.58</u>	
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>
					6 Months	<input type="checkbox"/>	Payment Amt. _____

[Signature]
Customer Service Manager



LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLANE2 13 TRANSH: 5439966 02-26-23

247823 RB MANSFIELD FLUSH VALVE 9.79
10.88 DISCOUNT EACH -1.09
1914770 2 IN UNIVERSAL FLUSH VALV 14.38
15.98 DISCOUNT EACH -1.60

SUBTOTAL: 24.17
TAX: 2.39
INVOICE 05758 TOTAL: 26.56
DEBIT: 26.56

TOTAL DISCOUNT: 2.69

DEBIT: XXXXXXXXXXXX9673 AMOUNT:26.56 AUTHCD: 457394

CHIP REFID:247105128383 02/26/23 13:32:21

*PIN Verified

TRACE: 00691134

PURCHASE CASH BACK TOTAL DEBIT
26.56 0.00 26.56

APL: US DEBIT TVR: 8080048000

AID: A000000980840 TSI: 6800

STORE: 2471 TERMINAL: 05 02/26/23 13:32:46

OF ITEMS PURCHASED: 2

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS
A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK MEYER

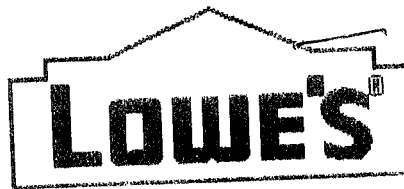
LOWE'S PRICE PROMISE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEPROMISE

SHARE YOUR FEEDBACK! *
ENTER FOR A CHANCE TO BE *
ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *
¡ENTRE EN EL SORTEO MENSUAL *
PARA SER UNO DE LOS CINCO GANADORES DE \$500! *

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Y O U R I D #057588 247180 578913 *

NO PURCHASE NECESSARY TO ENTER OR WIN. *
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *
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STORE: 2471 TERMINAL: 05 02/26/23 13:32:46



LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- MILITARY - PERSONAL USE SALE -

- SALE -

SALES#: S24710QL 4172658 TRANSH: 11522619 02-27-23

247823 RB MANSFIELD FLUSH VALVE 9.79
10.88 DISCOUNT EACH -1.09
379114 FLDMSTR TANK-TO-BOWL GASK 14.36
7.98 DISCOUNT EACH -0.80
2 @ 7.18

SUBTOTAL: 24.15
TAX: 2.38
INVOICE 11758 TOTAL: 26.53
DEBIT: 26.53

TOTAL DISCOUNT: 2.69

THANK YOU FOR YOUR
MILITARY SERVICE

DEBIT: XXXXXXXXXXXX9673 AMOUNT:26.53 AUTHCD: 913722

CHIP REFID:247111033320 02/27/23 12:28:15

*PIN Verified

TRACE: 00438769

PURCHASE CASH BACK TOTAL DEBIT
26.53 0.00 26.53

APL: US DEBIT TVR: 8080048000

AID: A000000980840 TSI: 6800

STORE: 2471 TERMINAL: 11 02/27/23 12:30:19

OF ITEMS PURCHASED: 3

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS
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AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK MEYER

LOWE'S PRICE PROMISE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEPROMISE

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ENTER BY COMPLETING A SHORT SURVEY *
WITHIN ONE WEEK AT: www.lowes.com/survey *
Y O U R I D #117580 247160 581309 *

1519
Rodeo

Clarence Sanders

026062-006

501-247-5917



LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALE#: FSTLANE1 13 TRANS#: 4619900 02-28-23

24408 FM REPLACEMENT FILL VALVE 8.08
8.98 DISCOUNT EACH -0.90

SUBTOTAL: 8.08
TAX: 0.80
INVOICE 04923 TOTAL: 8.88
DEBIT: 8.88

TOTAL DISCOUNT: 0.90

DEBIT: XXXXXXXXXXXX9673 AMOUNT:8.88 AUTHCD: 998017

CHIP REFID:247104097777 02/28/23 15:31:21

*PIN Verified

TRACE: 00552003

PURCHASE CASH BACK TOTAL DEBIT
8.88 0.00 8.88

APL: US DEBIT TVR: 8080048000

AID: A000000980840 TSI: 6800

STORE: 2471 TERMINAL: 04 02/28/23 15:31:40

OF ITEMS PURCHASED: 1

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
FOR DETAILS ON OUR RETURN POLICY, VISIT
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A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
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STORE MANAGER: MARK MEYER

LOWE'S PRICE PROMISE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEPROMISE

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* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *
*

* ENTER BY COMPLETING A SHORT SURVEY *
* WITHIN ONE WEEK AT: www.lowes.com/survey *
* Y O U R I D #049239 247140 592830 *
*

* NO PURCHASE NECESSARY TO ENTER OR WIN. *
* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *
* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

STORE: 2471 TERMINAL: 04 02/28/23 15:31:40

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2/2023 Service Account No.: 005402-000
 Customer Name: Peggy Morris Home Phone: _____
 Service Address: 9511 Hwy 5N #20 Work Phone: _____
 City: Alexander State, Zip: AR 72002
 Date Leak Detected: _____ Date Repaired: 2/2023

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

Toilet Leak
Shower Head Leaking

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

Sworn Statement:

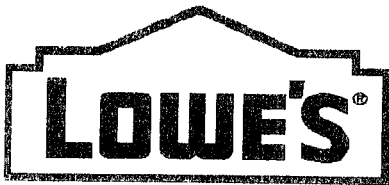
I _____ swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

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.

3 months		Amount of Bill:	<u>\$847.14</u>	Usage:	<u>475</u>
		Average Bill:	<u>\$97.55</u>	Three Month Average Usage:	<u>55</u>
		Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
		Amount of Adjustment to Sewer Bill:	<u>\$266.53</u>	Adjusted Bill Amount:	
Payment Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months	Payment Amt.	<u>\$580.61</u>

[Signature]
Customer Service Manager



How does
get more done.

17060 INTERSTATE 30
BENTON, AR 72015 (501)860-6288

1405 00061 88254 02/26/23 03:01 PM
SALE SELF CHECKOUT

LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALE#: FSTLANE2 13 TRANS#: 5546069 02-04-23

231258	ENERGIZER MAX AA 24CT	20.98
336621	6CT #8-32IN SP PNPH SS MS	2.78
1031369	56-FL OZ DAWN PLATINUM HE	10.48
4926908	154-OZ GAIN ODOR DEFENSE	15.98
MINIMUM RETAIL PRICE APPLIED TO THIS ITEM		
795256	KORKY 2-IN COMPLETE KIT	55.96
	2 @	27.98

SUBTOTAL:	106.18
TAX:	10.49
INVOICE 05248 TOTAL:	116.67
DEBIT:	116.67

DEBIT: XXXXXXXXXXXX6015 AMOUNT:116.67 AUTHCD: 629020
CHIP REF ID:247105125565 02/04/23 15:26:33

*PIN Verified
TRACE: 00990767

PURCHASE	CASH BACK	TOTAL DEBIT
116.67	0.00	116.67
APL: US DEBIT	TVR: 8080048000	
AID: A000000980840	TSI: 6800	

STORE: 2471 TERMINAL: 05 02/04/23 15:27:49

OF ITEMS PURCHASED: 6
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS

717301124259	WATER ALARM <A>	19.98
852604006779	BASEMENT WATCHDOG 110 DB WATER ALARM	16.88
ASOTV OVER LITE ULTRA		
897020002066	DRAIN WEASEL <A>	5.98
DRAIN WEASEL HAIR CLOG TOOL START KIT		
670750292736	PEX TOOL <A>	11.82
1/2"-1" PUSH PEX PIPE CUTTER		
820909903628	T HANDLE <A>	10.54
5/16"EVERBILT SQ SHAFT T HNDL W/KEY		

SUBTOTAL	65.20
SALES TAX	6.11
TOTAL	\$71.31

XXXXXXXXXXXX6015 DEBIT USD\$ 71.31

AUTH CODE 002267
Chip Read Verified By PIN
AID A0000000980840 US DEBIT

1405 02/26/23 03:01 PM



1405 61 88254 02/26/2023 0105

RETURN POLICY DEFINITIONS

POLICY ID	DAYS	POLICY EXPIRES ON
A 1	90	05/27/2023

DID WE NAIL IT?

Take a short survey for a chance TO WIN
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

www.homedepot.com/survey

User ID: H88 178202 176858
PASSWORD: 23126 176797

Entries must be completed within 14 days
of purchase. Entrants must be 18 or
older to enter. See complete rules on
website. No purchase necessary.



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AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK MEYER

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* ENTER FOR A CHANCE TO BE *

* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *

* ¡ENTRE EN EL SORTEO MENSUAL *

* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *

* ENTER BY COMPLETING A SHORT SURVEY *

* WITHIN ONE WEEK AT: www.lowes.com/survey *

* YOUR ID #052482 247160 355157 *

* NO PURCHASE NECESSARY TO ENTER OR WIN. *

* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *

* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

STORE: 2471 TERMINAL: 05 02/04/23 15:27:49

005402-000
Peggy Morris
501-317-0631

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/20/23 Service Account No.: 002902-000
 Customer Name: Terry Steed Home Phone: _____
 Service Address: 3412 Dearborn Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2/1/2023

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

Toilet Leak

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.

From 01/01/2022 to 01/01/2023							
<u>1 month</u>	Amount of Bill:	<u>326.10</u>			Usage:	<u>181</u>	
	Average Bill:	<u>40.61</u>			Three Month Average Usage:	<u>21</u>	
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By: _____			
	Amount of Adjustment to Sewer Bill:	<u>138.56</u>			Adjusted Bill Amount:	<u>187.54</u>	
	Payment Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt. _____

Customer Service Manager [Signature]

3412 Dearborn Cr.
James Steed

501-3522816

Acct 002902-000

2420 NORTH REYNOLDS BLVD
BIRMINGHAM, AL 35202 (205) 233-2000
SALE -
MILES: 507124 APPROX: 10000, 691515 02-25-23

202201 PM 3-10 ACING SPLIT KEYS 1.99
360005 KUMON SHARK FIN FLAPPER 10.48
180116 CM 25-PC PATCHET SIBBOLD 21.58

SUBTOTAL: 34.44
TAX: 3.49
INVOICE TOTAL: 37.94
DUES: 0.00

Q1SR-XXXXXXXXXXXX2600 AMOUNT: 37.94 AUTHID: 05559C
SHIP REFID: 24710210111 02/25/23 11:21:45
SPL: CRMC Q1SR ESN: 096006000

AID: 0650000001070 TSL: 6800
STORE: 2471 TERMINAL: 01 02/25/23 11:22:23

OF ITEMS PURCHASED: 3
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.

FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS
A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK NEVER

LOWE'S PRICE PROMISE
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ENTER FOR A CHANCE TO BE
ONE OF FIVE \$500 WINNERS DURING MONTHLY!
¡ENTRE EN EL SORTEO MENSUAL
POR SER UNO DE LOS CINCO GANADORES DE \$500!
ENTER BY COMPLETING A SHORT SURVEY
WITHIN ONE WEEK AT: www.lowes.com/survey
Y O U R I D # 013565 247130 544647

NO PURCHASE NECESSARY TO ENTER OR WIN.
VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER.
OFFICIAL RULES & WINNERS AT: www.lowes.com/survey
STORE: 2471 TERMINAL: 01 02/25/23 11:22:23

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3.23. Service Account No.: 001-04567-01
 Customer Name: Jamie Harnis Home Phone: _____
 Service Address: 3009 Stivers Work Phone: _____
 City: Bryant State, Zip: AR 72027
 Date Leak Detected: _____ Date Repaired: 3/2/23

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

Water Pressure Regulator Brake

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

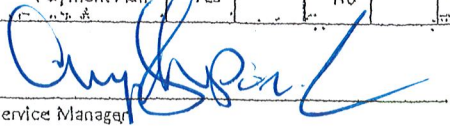
Sworn Statement:

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 OFFICIAL USE ONLY							
<u>3 months</u>	Amount of Bill:	<u>\$1,274.47</u>		Usage:	<u>675</u>		
	Average Bill:	<u>\$54.71</u>		Three Month Average Usage:	<u>29</u>		
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Approved By:			
	Amount of Adjustment to Sewer Bill:	<u>\$509.19</u>		Adjusted Bill Amount:	<u>\$765.28</u>		
	Payment Plan:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Payment Period:	<input checked="" type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months	Payment Amt.:		


 Customer Service Manager



Acct# 001-04567-01

7502 Peach Blossom Ave
BENTON, AR. 72019

JOB INVOICE
003390

LITTLE ROCK FAX BENTON
501-515-9700 501-847-9846 501-574-1300

Complete Plumbing Repairs MP5916

24 HR EMERGENCY SERVICE

DATE ORDERED
03-2-23
DATE PROMISED A.M. P.M.

BILL TO JAMIE HARRIS		PHONE
ADDRESS 3009 STIVERS BLVD		MECHANIC ERNIE
CITY BRYANT, AR. 72022		HELPER BASTIAN
JOB NAME AND LOCATION WATER LEAK SAME ABOVE		<input checked="" type="checkbox"/> DAY WORK <input type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA
DESCRIPTION OF WORK HAND DIGGING AT METER BOX WATER SERVICE LINE FOUND WATER PRESSURE REGULATOR BROKEN. REPLACED 3/4 H₂O REGULATOR & 3/4x4" BRASS. BACK FILLED & SMOOTHED GROUND. & RESET REGULATOR PRESSURE 75 PSI		

QUANT.	DESCRIPTION OF MATERIAL USED	PRICE	AMOUNT
1	3/4 ZURN BRASS LEAD FREE H ₂ O REGULATOR		
1	3/4x4" BRASS NIPPLE		
COMPLETED			
(1) ONE YEAR WARRANTY			
HOURS	LABOR	AMOUNT	
1.5	MECHANICS ERNIE @		P A I D
1.5	HELPERS BASTIAN @		
	@		
	EQUIPMENT		
		TOTAL MATERIALS	
		TOTAL LABOR	
I hereby acknowledge the satisfactory completion of the above described work.		TOTAL LABOR	TAX
SIGNATURE	DATE COMPLETED	TOTAL	
	03/2/23		\$ 425.00

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-11-23 Service Account No.: 101-07465-00
 Customer Name: Grant Heston Home Phone: _____
 Service Address: 5306 Buckingham Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-23

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

Toilets leaking

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									
3 months		Amount of Bill:	\$656.56			Usage:	377		
		Average Bill:	\$120.00			Three Month Average Usage:	64		
		Adjustment Approved:	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	Approved By:		
		Amount of Adjustment to Sewer Bill:	160.19			Adjusted Bill Amount:	\$496.37		
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Customer Service Manager

Give us feedback @ survey.walmart.com
Thank you! ID #:7SHJBB13289R

Walmart

501-847-2857 Mgr: CHRISTOPHER
400 BRYANT AVE
BRYANT AR 72022

ST#	QTY	DESCRIPTION	PRICE	STATUS
03230	OPN	000586	TE# 20	TR# 01434
GT	GRD	VEG	004400006458	F 3.58 R
KINDR	JPNCK	IS	075579565700	F 4.98 Y
GV	CRANBERRY		007874220105	F 1.96 T
STRAWBERRIES			071575520006	F 7.58 R
BLACKBERRY			071575610020	F 2.88 R
TOM	MEDLEY		068925900285	F 3.48 R
PIED	ADULT		002310014342	29.98 X
GIATORADE			005200032481	F 1.98 X
GREEN	GRAPE		780877210019	F
1.13	lb	@	1 lb / 1.68	1.90 R
BLACK	GRAPE		780012604056	F
1.71	lb	@	1 lb / 1.68	2.87 R
CIER	RT	CK	002310011628	11.98 X
GV	STEV	BOCT	007874206460	F 4.18 Y
GILEEM			006905512799	9.97 X
DEODORANT			003700096136	6.97 X
TAMPAX				4.67 X
IS				47 X
WASH			003300098773	1.50 Y
LL	SANI		084009825763	1.50 Y
TAMPAX			007301071297H	7.97 X
PLUMBING			004905710292	20.82 X
PLUMBING			004905710292	20.82 X
GV	MM	CC5CT	007874202239	F 2.78 V

SUBTOTAL	163.80
TAX 1	9.875 % 12.30
TAX 2	3.500 % 1.37
TOTAL	177.47
DEBIT	TEND 177.47
CHANGE DUE	0.00

EFT DEBIT PAY FROM PRIMARY
 177.47 TOTAL PURCHASE
 LIS DEBIT **** * 2987 I 1
 REF # 307000314939
 NETWORK ID. 0056 APPR CODE 367931
 LIS DEBIT
 AID A0000000980840
 AAC 2C4C2C804CF3FB5A
 *PIN Verified
 TERMINAL # SC010613
 03/11/23 14:13:40
 # ITEMS SOLD 24
 TCH 3715 4594 7135 1949 7194 5

Toilet

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-15-23 Service Account No.: 001-07956-04
 Customer Name: Ashleigh Dezonie Home Phone: _____
 Service Address: 3000 Ozark Work Phone: _____
 City: Bryant State, Zip: AR 72027
 Date Leak Detected: _____ Date Repaired: 3-1-23

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

Toilet Leaking

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:	586.25			Usage:	376		
		Average Bill:	82			Three Month Average Usage:	45		
		Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:	204.36			Adjusted Bill Amount:	381.89		
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.			

Customer Service Manager

Leak Adjust



LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLANE1 13 TRANS#: 4904918 03-15-23

2675011 1.5 CU FT FLW/VEG GRDN SO 7.50
MINIMUM RETAIL PRICE APPLIED TO THIS ITEM
2836368 FM 2-IN FLEXIBLE FLAPPER 4.98

SUBTOTAL: 12.48
TAX: 1.23
INVOICE 04724 TOTAL: 13.71
CASH: 14.00
CHANGE: 0.29

STORE: 2471 TERMINAL: 04 03/15/23 13:28:38
OF ITEMS PURCHASED: 2
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS
A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK MEYER

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* ENTER FOR A CHANCE TO BE *
* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *
* ¡ENTRE EN EL SORTEO MENSUAL *
* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *
* *
* ENTER BY COMPLETING A SHORT SURVEY *
* WITHIN ONE WEEK AT: www.lowes.com/survey *
* Y O U R I D #047241 247120 748295 *
* *
* NO PURCHASE NECESSARY TO ENTER OR WIN. *
* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *
* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

STORE: 2471 TERMINAL: 04 03/15/23 13:28:38

Ashleigh DeZonia

3000 Ozark Dr.

Bryant, AR. 72022

870-490-2327

Toilet running
flap changed

also garbage disposal
changed.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3.12.23 Service Account No.: 001-06449-01
 Customer Name: Paige Bullock Home Phone: _____
 Service Address: 2804 Lynne Ct Work Phone: _____
 City: Bryant State, Zip: AR
 Date Leak Detected: _____ Date Repaired: 3.12.23

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

Washing Machine kept Refilling

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							
3 month	Amount of Bill:	651.50			Usage:	362	
	Average Bill:	125			Three Month Average Usage:	68	
	Adjustment Approved:	Yes	No		Approved By:		
	Amount of Adjustment to Sewer Bill:	136.80			Adjusted Bill Amount:	514.70	
Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment Amt.	

Customer Service Manager



Lesa Warner <lwarner@cityofbryant.com>

[waterbilling] 2804 Lynne Court

1 message

Paige Bullock <paige.bullock@hotmail.com>

Wed, Mar 15, 2023 at 1:00 PM

To: "waterbilling@cityofbryant.com" <waterbilling@cityofbryant.com>

To whom it may concern:

We were FINALLY able to get the warranty company to fix our Samsung washing machine. It would get off balance, refill, try to spin, get off balance, refill, etc.

We didn't know what was going in at first and our water bill started to sky rocket. We even had someone to come check and see if there was a leak. Unfortunately, it was the possessed washing machine causing all the woes and using ALL the water.

It is fixed now. They sent this email as confirmation. I attached a screen shot. Prayerfully, our water bill will return to normal.

Please consider forgiving some of the water usage. It would be much appreciated.

Toby and Paige Bullock
2804 Lynne Court
Bryant, AR 72P22

Sent via the Samsung Galaxy S21 5G, an AT&T 5G smartphone



Screenshot_20230313_213737_Email.jpg
398K



Inbox

paige.bullock@hotmail.com



Reminder that you have an upcom...



Bridgestone Retail Op... 10:35 AM

Reminder: Please tell us about yo...

Dear PAIGE BULLOCK, Thank you...



Prime Video 10:12 AM

Explore our Women's History Mont...

Many movies and series are yours...



service@assurant.por... 10:00 AM

Repair Complete on Incident Num...

Your Repair is Complete Hello DE...



ACS, LLC has completed repairs for incident number 23162461DF for your FRONT LOAD WASHING MACHINE.

The Service Company assigned to your request was:

ACS, LLC
(844) 229-7764
SALES@ACSPROTECH.COM

If you need further assistance, please feel free to contact ACS, LLC at (844) 229-7764.

Please do not reply to this email, this email address is not monitored.

Thank You,

Your Customer Care Team

We hope you found this message to be useful. However, if you'd rather not receive future emails please go [here](#) and disable notifications under Communications Preferences.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2/23 Service Account No.: 001-03376-01
 Customer Name: Kaylee Turnbough Home Phone: _____
 Service Address: 111 N. Vine Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/23

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

Toilet Leak

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

Sworn Statement:

_____, 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:		\$466.98		Usage:		241	
		Average Bill:		\$87		Three Month Average Usage:		37	
		Adjustment Approved:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Approved By:			
		Amount of Adjustment to Sewer Bill:		\$144.60		Adjusted Bill Amount:		\$322.38	
Payment Plan		Yes <input type="checkbox"/> No <input type="checkbox"/>		Payment Period		3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>		Payment Amt.	

Customer Service Manager _____

Phil Williams
501-943-2613

401406



LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: S2471UIC 3738674 TRANS#: 9598440 02-28-23

24408 FM REPLACEMENT FILL VALVE 8.98

SUBTOTAL: 8.98

TAX: 0.89

INVOICE 09755 TOTAL: 9.87

CASH: 10.00

CHANGE: 0.13

STORE: 2471 TERMINAL: 09 02/28/23 09:34:00

OF ITEMS PURCHASED: 1

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.

FOR DETAILS ON OUR RETURN POLICY, VISIT

LOWES.COM/RETURNS

A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE

AT OUR CUSTOMER SERVICE DESK

STORE MANAGER: MARK MEYER

LOWE'S PRICE PROMISE

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* ENTER FOR A CHANCE TO BE
* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY!
* TENTE EN EL SORTEO MENSUAL
* PARA SER UNO DE LOS CINCO GANADORES DE \$500!

* ENTER BY COMPLETING A SHORT SURVEY
* WITHIN ONE WEEK AT: www.lowes.com/survey
* YOUR ID #097559 247150 590697

* NO PURCHASE NECESSARY TO ENTER OR WIN
* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER
* OFFICIAL RULES & WINNERS AT: www.Lowes.com

STORE: 2471 TERMINAL: 09 02/28/23

CUSTOMER'S ORDER NO.		DATE	
		2-28-23	
NAME Kaylee Turnbrough			
ADDRESS 111 N Vine			
CITY, STATE, ZIP Bryant AR 72022			
SOLD BY RW	CASH	C.O.D.	CHARGE
		ON ACCT.	MOSE NETD.
			PAY OUT
QTY	DESCRIPTION	PRICE	AMOUNT
1	Repair Toilet	10.00	10.00
2	Parts	40.00	40.00
3	Labor		
4	Total	50.00	50.00
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
RECEIVED BY		TAX	
		TOTAL	

A-24705W
1-46501

KEEP THIS SLIP FOR REFERENCE

01-11

001-03376-01

PH
501-722-7185

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/23 Service Account No.: 003-08414-01
 Customer Name: Clayton Law Home Phone: _____
 Service Address: 2507 Springhill Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2/27

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

Water Pressure Regulator Leaking

Sewer Only

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

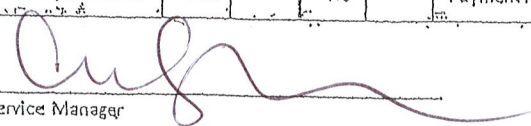
Sworn Statement:

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										
<u>3 months</u>	Amount of Bill:	<u>565.90</u>			Usage:	<u>538</u>				
	Average Bill:	<u>32</u>			Three Month Average Usage:	<u>28</u>				
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:					
	Amount of Adjustment to Sewer Bill:	<u>240.83</u>			Adjusted Bill Amount:	<u>325.07</u>				
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.	<input type="checkbox"/>



Customer Service Manager

2:12



Done sharp3100@gogwatney...



Clayton Law
2502 Springhill
479-414-6776

663-08414-01

NC2817 • NC3817-50 • 3866

carbonless job invoice

Johnston Service Company
2462 Dogwood Ln
Austin TX 78007

501-804-3876

Job Invoice

SOLD BY
Alan Benoit
2502 Springhill Rd
Bryant TX 77022

DATE ORDERED 2-27-22	ORDER TAKEN BY <i>Benoit</i>
PHONE NO. 501-766-0297	CUSTOMER ORDER #
JOB LOCATION Alanthehulk@gmail.com	STARTING DATE
JOB PHONE	
TERMS	

QTY.	MATERIAL	UNIT	AMOUNT	DESCRIPTION OF WORK	
	part cc			Found leak on right side of house on water pressure regulator. Valve removed union and used 1" pipe to make correct hole to put a piece of 1" pipe to make correct length. No leaks at this time.	
MISCELLANEOUS CHARGES					
TOTAL MISCELLANEOUS					
		LABOR	HRS.	RATE	AMOUNT
					<i>Benoit</i>
TOTAL MATERIALS			TOTAL LABOR		

WORK ORDERED	TOTAL LABOR
DATE ORDERED	TOTAL MATERIALS
DATE COMPLETED	TOTAL MISCELLANEOUS
CUSTOMER APPROVAL SIGNATURE <i>X</i>	SUBTOTAL
	TAX
	CASH TOTAL <i>200.00</i>



DESCRIPTION OF WORK

found leak on right side of
house on water pressure regulator
union removed union and
used 1" nipple to make connecti-
on to put a piece of 1"
Pvc to delay extra length.
No leaks at this time.

MISCELLANEOUS CHARGES

0545

Job Invoice

DATE ORDERED 02.27.22	ORDER TAKEN BY <i>[Signature]</i>
PHONE NO. 501.766.0297	CUSTOMER ORDER #
JOB LOCATION Alanthehulk@gmail.com	
JOB PHONE	STARTING DATE
TERMS	

DESCRIPTION OF WORK

Found leak on right side of house on water pressure regulator. Union removed union and used 1" nipple to make correct. had to put a piece of 1" pipe to make up extra length. No leaks at this time.

MISCELLANEOUS CHARGES

TOTAL

LABOR

HRS.

RATE

AMOUNT

[Signature]

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/23 Service Account No.: 003-10099-00
 Customer Name: Stacy Baker Home Phone: _____
 Service Address: 2527 Hurricane Work Phone: _____
 City: Benton State, Zip: AR 72019
 Date Leak Detected: _____ Date Repaired: 3/8/23

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

water line leaking

Sewer Only Cust

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									
1 month	Amount of Bill:	321.21			Usage:	304			
	Average Bill:	55			Three Month Average Usage:	53			
	Adjustment Approved:	Yes			No	Approved By:			
	Amount of Adjustment to Sewer Bill:	133.15			Adjusted Bill Amount:	188.06			
Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment Amt.			

[Signature]
 Customer Service Manager

STACY Baker - 028944-000
 2527 Hurricane Gardens,

STOUT PLUMBING COMPANY, INC.

5703 Beth Lane
 Benton, AR 72019

Invoice

Date	Invoice #
3/8/2023	15447

Bill To
Covenant Home Builders, Inc. P. O. Box 370 Bryant, Ar 72089

P.O. No.	Terms	Project
	Due on receipt	

Description	Qty	Rate	Amount
2527 Hurricane Gardens		0.00	0.00
Labor		150.00	150.00
Repair water line			
Materials		23.34	23.34
Total			\$173.34
Payments/Credits			\$0.00
Balance Due			\$173.34

Phone #
501.794.2921

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/23 Service Account No.: 102-02264-00
 Customer Name: Alvin Smith Home Phone: _____
 Service Address: 3218 Stone Pine Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/23

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

Toilet Leaking

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

Sworn Statement:

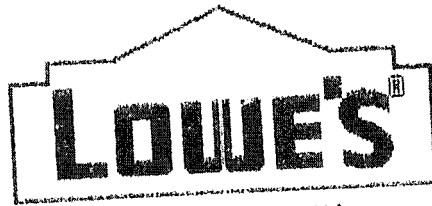
I _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

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									
<u>3 months</u>	Amount of Bill:	<u>1,748.75</u>			Usage:	<u>977</u>			
	Average Bill:	<u>55</u>			Three Month Average Usage:	<u>29</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>770.73</u>			Adjusted Bill Amount:	<u>978.02</u>			
	Payment Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt.		

[Signature]
 Customer Service Manager



LOWE'S HOME CENTERS, LLC
 2330 NORTH REYNOLDS ROAD
 BRYANT, AR 72022 (501) 213-2000

102-02264-00

Alvin Smith

3218 Stonepine
Dr.

- SALE -

SALES#: S24711010 3738674 TRANS#: 9454790 02-03-23

247823 RB MANSFIELD FLUSH VALVE 10.80
 4891699 PROJECT SOURCE 2-PACK HAI 3.98
 17056 KURKY 3-IN ANSTD AND KOHL 6.99

SUBTOTAL: 21.85
 TAX: 2.16
 INVOICE 09237 TOTAL: 24.01
 DISC: 24.01

DISC: XXXXXXXXXXXX9658 AMOUNT: 24.01 AUTHCD: 00339R

CHIP REFID: 247109164578 02/03/23 16:52:57

APL: Discover Credit TVR: 0000008000

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OF ITEMS PURCHASED: 3
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