

NORTH PORT UTILITIES

4970 City Hall Boulevard
North Port, FL 34286
Phone: (941) 429-7122 Fax: (941) 429-7121

Adjustment Request Form

A billing adjustment to a utilities' account may be requested **once per calendar year for each property** serviced by North Port Utilities. A payment or payment arrangement must accompany this form, along with any necessary supporting documentation before the adjustment request will be considered. Please be advised, you are responsible for any unpaid balance on your account and submittal of the adjustment request does not prevent your account from further action or fees related to a late payment, delinquency processing fee, shut off water fee, etc.

DATE: _____

CUSTOMER NAME: _____

CYCLE: _____

SERVICE ADDRESS: _____

ACCOUNT NUMBER: _____

TELEPHONE NUMBER: _____

PLEASE CHECK ONE:

_____ LEAK (please include leak location) _____

_____ POOL FILL (please include gallons used) _____

_____ BACKFLOW _____ WATERING (NEW SOD/LANDSCAPE) _____ RUNNING TOILET

_____ UNEXPLAINED _____ OTHER (please include description)

CAUSE OF WATER LOSS: _____

DATE(S) OF WATER LOSS: _____ DATE(S) OF REPAIR: _____

IF AVAILABLE, PLEASE ATTACH A COPY OF REPAIR INFORMATION (FROM PLUMBER, HANDYMAN, POOL COMPANY, ETC) OR RECEIPT FOR PARTS USED IN THE REPAIR.

BECAUSE THE LOSS OF WATER MAY AFFECT MORE THAN ONE BILLING PERIOD, STAFF MAY HAVE TO WAIT FOR THE NEXT METER READING BEFORE THE ACCOUNT IS REVIEWED. THEREFORE, MAKE PAYMENT ACCORDINGLY TO AVOID ADDITIONAL FEES OR ACTIONS RELATING TO A LATE PAYMENT. PLEASE FEEL FREE TO CONTACT OUR OFFICE TO DISCUSS A PAYMENT EXTENSION OR PAYMENT PLAN.