



Leak Adjustment Policy

Approved by the Avra Water Co-op, Inc. Board of Directors
10/26/2016

Effective Immediately

Adjustment Criteria

The Leak Adjustment Policy only applies to single-family residential customers who are in good standing, have not had an adjustment within the last 24 months, files an application with statement of what the acute issue was that caused the high use, and have use that is more than three times the average monthly usage for the preceding 12-month period.

Adjustment Goals

The goal of the policy is to provide financial relief for unforeseen events that can be documented by removing the excess use off the tiered rate structure and continue to recover a cost of water rate.

Example

Current tiered charges for a 5/8" x 3/4" meter:	0-7,500 gallons	\$2.50
	7,501-15,000 gallons	\$3.06
	Over 15,000 gallons	\$3.66

*A 150,000 gallon leak would realize a savings of \$160.80

1st Tier Charges	\$18.75	1 st Tier Charges Only	\$375
2 nd Tier Charges	22.95		
3 rd Tier Charges	<u>494.10</u>		
	535.80		



LEAK ADJUSTMENT APPLICATION

This application is for a review of an unusually high use water bill. Application must be received within 30 days of the date the water meter was read. Once completed, return the application to the Avra Water Co-op, Inc. Customer Service Department, with all accompanying material. Applications will be reviewed and customers will be contacted within ten business days. If you have any questions, contact Avra Water Co-op at (520) 682-7331.

During the application review period, no late fees will be charged and there is no jeopardy of disconnection.

Name: _____ Date: _____

Service Address: _____

Phone Number: _____ Email: _____

Description of the Leak and Repair

(Please include documentation that leak has been repaired, i.e. photos, receipts, & other documentation)

For Office Use Only:

CST Initials: _____

Date: _____

Account #: _____

Meter Read Date: _____

No adjustment w/in 24 months _____

Acct is current _____

Applicant is on acct _____

High use amount at least 3 times twelve month average _____

Leak has been repaired w/ documentation: _____

Customer is approved for the adjustment

Adjustment Total: _____

Date of Adjustment: _____