



# CITY OF HAGERSTOWN

1 EAST FRANKLIN STREET  
HAGERSTOWN, MD 21740  
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**Water Division**  
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## Water and/or Wastewater Bill Adjustment Request Form

**\*Please note: Quarterly bills older than 3 quarters are not eligible for adjustments. Monthly bills older than 6 months are not eligible for adjustments.\***

Name on Account: \_\_\_\_\_  
Account Number: \_\_\_\_\_  
Service Address: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_  
E-mail Address: \_\_\_\_\_

Leak Information – state when leak was discovered and brief description of the leak:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Repair Information– description of repairs made and **REQUIRED: attach copy of plumber’s invoice and/ or receipts for parts:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I am requesting for an adjustment on my water/wastewater utility bill number \_\_\_\_\_ (state bill number) due to a water leak. I attest that all the information above is accurate to the best of my ability.

\_\_\_\_\_  
Signature of Owner/Prop Mgmt co

\_\_\_\_\_  
Date

Please return by mail or in person at 1 E Franklin St Hagerstown, MD, or email to [BillingMail@hagerstownmd.org](mailto:BillingMail@hagerstownmd.org) or fax to 301.797.6173. Adjustments are not processed same day. Please keep in mind, tenants cannot authorize an adjustment application.