

MAYOR Robert Bruchey II

## **COUNCIL** Kristin Aleshire

Kristin Aleshire
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## CITY OF HAGERSTOWN

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## Water and/or Wastewater Bill Adjustment Request Form

Name on Account:			
Account Number:			
Service Address:			
Telephone Number: E-	E-mail Address:		
Leak Information – state when leak was	s discovered and bri	ief description of th	e leak:
Repair Information – description of repa or receipts for parts:	pairs made and attac	h copy of plumber'	s invoice and
I am requesting an adjustment on my w (state bill number) due to a water leak. the best of my ability.		•	
Signature of Customer	Date		