

CITY OF BOERNE UTILITY LEAK ADJUSTMENT REQUEST

Instructions: Please complete the form below and attach your receipt for plumbing repairs. Please return your completed form and attached receipt to the City of Boerne Billing Office:

In person: 447 N Main

By mail: PO Box 1677
Boerne, TX 78006

By email: Billing@boerne-tx.gov

By fax: 1-830-248-1120

Date: _____

Account Number: _____

Account Holder: _____

Contact Phone Number: _____

Service Address: _____
(address where the plumbing problem is located)

Date range of leak was from _____ - _____ to the best of my knowledge.

Customer's Affirmation

A plumbing problem, at the above service address, has resulted in water consumption being more than 50% higher than the normal water usage. Additionally, if the leak was between December and March, please check the sewer calculation to determine if the high consumption effected the monthly sewer charge. If so, please adjust accordingly.

Customer Signature

NOTE:
SCANNED LETTER/RECEIPT:
WLA