

Application for Authority Adjustment

- A) Authority Adjustments will be processed in accordance with the Adjustment Policy 2.40. This includes, but is not limited to, the following:
- 1) If approved, the volume portion of the bill will be adjusted to equal to the average volume consumption for the impacted service address.
 - 2) Supporting documentation is required, as noted below.
- B) In order to submit a request for an adjustment, the following items listed below **are required:** (**initial** the supporting documents and return with this **signed** form)
- _____ A written request that must contain a description of the cause of the high bill and include an original signature on the request
- _____ This form, with an original signature on it

By signing this application, I am certifying that the adjustment being requested was due to a problem on the Bedford Regional Authority's side of service.

Printed Name

Date

Signature

This section to be completed by Authority personnel.

To assist with the processing of the adjustment, the following items listed below **are to be provided by the Authority:** (**Authority staff initial** the supporting documents)

_____ Work order from Maintenance Department

_____ Photos of the cause of the leak and/or photos of the work done

_____ Brief description of the reason for the adjustment:

