Customer’s Request for Leak Adjustment

Leak Adjustment Policy:
High bill adjustment approval is considered a courtesy to customers. Service lines from the point of connection at the meter to the residence/business and any associated plumbing systems and their integrity are the sole responsibility of the property owner.

Please provide the following information:

Customer Name: ________________________________
Account Number: ________________________________
Service Address: ________________________________
Telephone Number: ________________________________

Describe the type and location of the leak:
____________________________________________________________________________________
____________________________________________________________________________________
____________________________________________________________________________________

Date the leak was repaired: __________________________

Attach a copy of the plumber’s invoice for the repair. If the repair was completed by the property owner or customer, provide a copy of the sales receipt for parts and an explanation of the repair performed.

I certify that to the best of my knowledge that the above information is true and correct.

Customer Signature: ____________________________________________
Date: __________________________________________________________

Please contact a Customer Service Representative at 410-548-2800 if you have any questions. The completed form and any attachments should be returned to the City of Fruitland by either of the options listed below.

Mail: City of Fruitland P.O. Box F Fruitland, MD 21826
Fax: 410-548-4354
Email: sdennis@cityoffruitland.com