



765 Main Street NE
PO Box 332
Palmyra, Indiana
47164-0332
(812) 364-6106
(812) 364-1297

Leak Certification Form

Customer Name/Acct # _____

Customer Address _____

Phone Number _____

Date I became aware of the leak _____

Date I discovered Location of leak _____

Date I notified the water utility _____

Specify where leak occurred on property _____

Materials used for repair _____

Date Leak repaired _____

Person/ Company who repaired _____

Address _____

Phone Number _____

I hereby certify and affirm under penalty of perjury that the above leak adjustment request is true and correct, I agree to the Leak Adjustment Eligibility Requirements in the Water & Sewer Policy, and I have not had a leak adjustment in the past twelve (12) months.

Customer Signature _____ Date _____