

Please download the form and open it with ADOBE READER in order to submit it via email! An active email account is required.

Application for Credit
WATER DEPARTMENT
P.O. Box 74, Metter, GA 30439
Phone (912)685-2527, Fax (912)685-3364
"Everything's Better in Metter!"

Name: _____

Service Location: _____

Date of Occurrence: _____

Name of Plumber: _____

Notes/Reason: _____

Size of Pool:

Inground: Length _____' Width _____' Depth (Deep End) _____'

Above ground: Diameter _____' Depth _____'

1. When a customer has a leak, they will have a period of forty-five days from the prior meter reading before the leak occurred to submit their application.
2. The customer must provide written proof, with the application, that documents the leak has been repaired.
3. Once the application has been submitted, it will be reviewed by the Public Works Director and either approved or denied based on the information submitted in the application. **The credit will be given only after the usage goes back to the normal consumption.**
4. Submission of an application is no guarantee that the credit will be approved.
5. **Credit will be given for sewer only.** If a customer is not on city sewer, no credit will be given.
6. **Credit shall be given only one time per year, per customer and for only a two month period billing cycle of the two highest months.**
7. **No credit will be given for leaks on yard meters.**

Customer Signature

Date

FOR OFFICE USE ONLY



Abnormal Consumption: _____ gallons

Water Credit: \$ _____

Average Consumption: _____ gallons

Sewer Credit: \$ _____

City Account #: _____

Late Fee Credit: \$ _____

Total Amount of Credit Due: \$ _____

Sanitation Credit: \$ _____

Applied to Account by: _____

Trash Credit: \$ _____

Last Date Meter Read: _____

Approved by: _____

Date: _____

Denied By: _____

Date: _____

Customer has not had a **CREDIT** this calendar year: _____

Usage returned back to normal average consumption on: _____
Date

Customers usage verified by: _____