



CITY OF EAGLE POINT

17 N Buchanan Ave. P.O. Box 779 Eagle Point, OR 97524
(541)826-4212 Fax (541)826-6155

LEAK ADJUSTMENT REQUEST

The City of Eagle Point will assume no responsibility for costs associated with repairs.

Date: _____ Account #: _____

Customer Name: _____ Phone #: _____

Alternate Phone#: _____

Service Address: _____

Mailing Address: _____

Owner/Landlord Name: _____

Leak adjustments will be allowed one time only – per residence.

Explanation and location of leak:

*****Repair descriptions & receipts must be attached*****

(Copies only. Black out all Credit Card Information)

Please be aware, the customer will be responsible for the mandatory fees charged by Medford Water Commission (\$0.95 per 1000 gallons) and a minimum Administration Fee of \$20.00.

Date Repaired: _____ Repaired By: _____

Customers Signature: _____ Date: _____
