



County of Volusia

Water Resources and Utilities

123 West Indiana Ave Room 402, DeLand, FL 32720 Telephone 386-736-5971 www.volusia.org

UTILITIES ADJUSTMENT REQUEST APPLICATION

As a customer of Volusia County Water Resources and Utilities, you have the right to request an adjustment on your current water bill. You can request this adjustment by completing and submitting this application. Your payment and supporting documents must accompany this application to be considered for an adjustment. Submittal of this request does not prevent your account from collection activity, including interruption of service.

I, _____ account holder of the property located at: _____, Account # _____ hereby request consideration of an adjustment to my account.

Please select the reason for the adjustment request.

_____ **Leak (Please attach invoices or receipts related to completed repair).**

Date of repair: _____

_____ **Initial Pool Fill**

_____ **Pool Repair**

Date of pool fill: _____ Capacity of pool: _____ Est. gallons used: _____

_____ **Other (please explain):**

Customer name: _____ Telephone number: _____

E-mail address: _____

By submitting this application, I am aware that only one adjustment per calendar year will be granted on my account. I further understand that this application must be accompanied with supporting documents to be considered for an adjustment. I also understand my responsibility of any balance on the account while the account is being reviewed and subject to any collection activities, including interruption of service.

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

Signature: _____ Date: _____

Please allow 2 – 3 month processing time for this request.

For Office Use Only

Amount of adjustment: _____ Penalty removal: _____

Completed on: _____ by _____