

MONTGOMERY COUNTY
PUBLIC SERVICE AUTHORITY
Government Center
Suite 2I
755 Roanoke Street
Christiansburg, VA 24073-3185

REQUEST FOR WATER / SEWER ADJUSTMENT

Date of Request:			
I am requesting an a	djustment on the utitlity bil	l at the follo	owing location:
Customer Name:			
Service Address:			
Account Number:		Telephor	ne #:
understanding that on the may not be eligible for in the order the requestion of the statement as a sunderstand that particular that particular individual in the sunderstand that particular individual in the sunderstand that particular individual indivi	yment may not be withheld	s been comp d the review t issued will l; a 10% pen	oleted, the account w process is performed I be reflected on my nalty will be
	at are not paid on or before		
	epair receipt attached? circle one)	YES NO	Date of Repair:
*If you have provide "Statement of Repair		air bill, you a	are not required to write out a
		STATEME	ENT OF REPAIR
What was repaired?			
CUCTOBAEDIC CICALATUDE.			