

The City of Senoia offers a **Leak Adjustment Water Protection Program**. Details of the Protection Program are below along with coverage amounts charged per meter:

* Eligible residential and irrigation customers are enrolled in the first tier of residential and irrigation Protection coverage, which is $1,000 coverage (per year) for $2.00/month. Additionally, you may request to enroll in the second tier, which is $2,000 in residential and irrigation coverage (per year) for $4.00/month.
* Eligible Commercial, Industrial and school customers are enrolled in the first tier of Protection coverage, which is $5,000 coverage (per year) for $10.00/month. Additionally, customers may request to enroll in the second tier, which is $10,000 of coverage (per year) for $20.00/month.

With City of Senoia **Protection Program**, should you have a leak you are **responsible for paying your base charge and your average bill over the last 3 months.**  The Protection can only be used towards one leak in a 12-month period. For water charges in excess of coverage, we will apply an adjustment following application of Protection.

We will apply a Protection charge of $2.00/month for $1,000 leak adjustment Protection for residential and irrigation and $10.00/month for $5,000 leak adjustment Protection service. If you wish to apply for the higher tiers of coverage, please call (770) 599-3679.

Should you decide to not participate in our **Protection Program**, please let us know that you wish to “opt out” by emailing us at [aedens@senoia.com](mailto:aedens@senoia.com) or completing the waiver contained within this document and returning to City Hall within thirty days of enrollment. We will remove the charge on future bills; however please note that you will be responsible for paying all balances due after we provide any adjustment subject to our updated Policy and at our sole discretion.

\*No credit will be given in any twelve (12) month period above the Protection coverage amount for any leak occurrence; nor to anyone who has opted out of coverage. The “Protection Program” as implemented by the City of Senoia, shall mean a program by which eligible customers will be protected from inordinate charges in the event of a leak as defined in the Leak Adjustment. No protection is afforded to any eligible customer who fails to repair a defective waterline leak after ten (10) days of notification or detection of said leak. The City of Senoia may deny leak protection coverage partially, or in its entirety, at its sole discretion.



**Notice to Opt Out of Coverage:**

Customer Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Contact Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By my signature below, I hereby “opt out” refusing the Leak Adjustment Protection Program and request the monthly charge removed from my monthly bill. I understand that I am responsible for paying all balances due after the City of Senoia provides any adjustment subject to the updated Leak Adjustment Policy and its sole discretion.

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_



**Leak Adjustment Policy**

The City of Senoia is committed to water conservation and encourages customers to do their part to reduce lost water by repairing leaks in a timely manner. In addition, there are significant costs in producing clean water and delivering it on a continuous basis to your home or business. The City of Senoia is responsible for providing water to its customers at each meter location, customers are responsible for maintaining their water system, and any irrigation system connected to their side of the meter. The customer (account holder) is responsible for any water lost due to leaks or breakage of their lines. The City of Senoia may grant a leak adjustment, at its sole discretion, subject to the following qualifications:

* Following notification by the City of Senoia or detection by the customer, leaks must be repaired within ten (10) calendar days or any adjustment, granted at the City of Senoia’s sole discretion, will be forfeited.
* The leak causing the high consumption must be repaired and city technicians must confirm the repair.
* A request for a leak adjustment must be submitted to the City of Senoia within thirty (30) days of the notification by the City of Senoia or the detection by the customer of the leak.
* No leak adjustment will be given for any reason other than a leak. As an example, events that do not qualify for an adjustment any longer include but are not limited to; filling a pool, leaving a hose or faucet on or overuse of irrigation systems does not constitute a “leak” under terms of this policy.
* Customers must make a written request for a leak credit by fully completing the “Leak Adjustment Request” form (located at [www.Senoia.com](http://www.Senoia.com) – Forms/Applications – Leak Adjustment Form). **Proof that the leak has been repaired must be provided in the form of a receipt for supplies purchased (if repaired by the customer) or a bill from a licensed plumber.**

No leak credit will be issued without the submission of all appropriate documentation.

* A prior leak adjustment must not have exceeded the allowable amount during the past twelve (12) months. The twelve (12) months starts over on the date the City of Senoia verifies the leak is repaired and the allowable yearly amount has been exhausted.
* Customer’s account at the City of Senoia must be paid in full and in good standing.
* Customer must pay **at least** the average monthly payment over the last three (3) months while the leak adjustment is considered by the City of Senoia.
* Adjustments will be applied towards a maximum of two (2) consecutive bills that were affected by the leak, which **must** include the date of repair.
* Where there are less than three (3) months of a billing history, the adjustment will be calculated from a base monthly average of 5,000 gallons.

Abuse of this policy is strictly prohibited. Any customer abusing this policy will have their leak adjustment reduced and/or denied. The City Manager retains the final discretion on all leak adjustments.



**Tier Increase Form**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By my signature below, I hereby request the City of Senoia to increase my leak Protection coverage from Tier 1 to Tier 2. Coverage details are provided in the Leak Coverage Program documentation, which I have read.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date



**Leak Adjustment Form**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Account Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Service: Water Irrigation

Date Leak Detected \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date Leak Repaired \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\*Self-Repair Licensed Plumber

\*By checking self-repair, you are certifying you do not have an invoice or receipt from a licensed plumber.

Please provide a brief explanation of the leak and associated repairs below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

By signing below, you certify that you are the responsible party for the account at the above service address. You further certify that you are requesting a leak adjustment from the City of Senoia and acknowledge that the “Leak Detected On” and the “Leak Repaired On” dates are accurate the best of your knowledge. Furthermore, by submitting this application you understand that a leak adjustment will be issued without the submission of all appropriate documentation and that the City of Senoia will provide an adjustment at its sole discretion.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature Date