



119 East Olin Ave  
Madison, WI 53713  
(608) 266-4651  
Madisonwater.org

## Application for One-time Leak Adjustment

Please print clearly and review the [program rules](#). Applications with missing or incomplete information will be rejected.

### Applicant Information

Applicant name \_\_\_\_\_ Property Management Company (if applicable)

Address \_\_\_\_\_ City/State/Zip

Mailing address (if different from above) \_\_\_\_\_ City/State/Zip

Daytime phone number \_\_\_\_\_

I am the:  Property owner  Tenant  Property Manager  Other (please specify) \_\_\_\_\_

Approximate date leak began: \_\_\_\_\_ Date Leak Repaired: \_\_\_\_\_

Description of leak and repair:

### Application Agreement

The leak adjustment is a **one-time** credit on the Madison Municipal Services Bill. I understand that this property will not be eligible for any additional leak adjustments in the future if this request is approved.

Applicant Signature/ Initials \_\_\_\_\_ Date \_\_\_\_\_

### Submission Instructions:

Forms can be submitted by email, fax, or U.S. Mail.

Email: Send completed applications as an attachment to [waterbilling@madisonwater.org](mailto:waterbilling@madisonwater.org)  
Fax: Send to (608) 266-4426  
Mail: Madison Water Utility  
119 East Olin Ave  
Madison, WI 53713