

CUSTOMER REQUEST
FOR ADJUSTMENT ON
WATER AND/OR SEWER SERVICE ACCOUNT
FROM THE TOWN OF BRASELTON

Date: _____ Account Number: _____

Customer Name: _____

Service Address: _____

Home Phone: _____ Work Phone: _____

Request: _____

Billing Clerk Remarks: _____

Finance Director remarks: _____

See Attached History and Account Review

Town Manager Decision: _____

Note: All adjustments are approved by the Town Manager. In order not to be penalized, bill must be paid, then if an adjustment is granted it will be applied to your account. No checks will be written.

Customer Signature

Finance Director Signature

Town Manager Signature

Please fax back to 706-654-3033 or bring to Town Hall or email to jdees@braselton.net along with any supporting documentation.