



BOROUGH OF AVALON

3100 Dune Drive

Avalon, New Jersey 08202

INSTRUCTIONS FOR APPLICATION FOR ADJUSTMENT TO SEWER BILL

If your leak was UNDERGROUND please proceed with completing the Application for Adjustment to Sewer Bill.

Please complete the back portion of this form. All parts of this application must be completed. Incomplete applications will not be processed. Be sure that the form is signed and dated where indicated. **Applications must be received within thirty (30) days of the Due Date of the bill which you are applying for adjustment. No consideration for adjustment will be accepted after the thirty (30) day period is over.**

***You MUST attach a copy of your plumber's bill showing that the leak has been repaired, where the leak was and photos before, during, and after. No application will be processed without a statement or bill from a licensed plumber or builder. ***

The following situations are **NOT** eligible for adjustment:

- * Where the owner or occupant has not properly serviced, maintained, or drained the pipes or fixtures to prevent freeze-ups or damage.
- * Where the defect or failure could have been discovered by reasonable diligence and periodic property inspections on the part of the owner or occupant or someone acting for the owner or occupant.
- * The rupture of any above ground pipe(s) (Including crawl spaces).
- * The rupture of any interior pipe(s) or fixture(s).
- * The rupture of any exterior pipe(s) or fixtures(s).
- * Running toilets.

FOR BOROUGH USE ONLY

Name:

Property Location:

Print Name: - Business Administrator

Print Name: - Director of Public Works/Utilities

Print Name: - Tax Collector

Approve	Deny
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>

Initial:

Amount for Adjustment: \$

Initial:

Initial:

APPLICATION FOR ADJUSTMENT TO SEWER BILL

1. Property Owner	
2. Contact Information	Phone: _____ Email: _____
3. Property Location	
4. Block / Lot / Qualifier	
5. Billing Being Protested	
6. Cause of Leak	
7. When was the leak discovered?	
8. When was the leak repaired?	
9. Name/Company Name and Address of Plumber who repaired the leak	<u>Name / Company Name:</u> <u>Address:</u>
10. Plumber's State License Number	
11. Do you winterize your property?	
12. How long have you owned this property?	
13. Write in detail the circumstances regarding your leak	

You must attach a copy of your plumber's bill including work completed & location of leak

***Only sewer charges based on excess use may be submitted for adjustment. You are still responsible for paying the remainder of your bills by the due date.**

I certify that the foregoing statements made by me are true. I am aware that if any of the foregoing statements made by me are willfully false I am subject to punishment. The foregoing statements are made with the understanding and intention that they be relied upon by the Borough of Avalon for the purpose of determining whether I am entitled to any adjustment or relief upon my sewer bill.

Signature

Date

Return form to: Borough of Avalon 3100 Dune Drive Avalon, NJ 08210