

**LEAK ADJUSTMENT REQUEST - Residential**

Prepared By: Dawn Richardson  
Customer Name: Doug Morten  
Account #: 22-04332-000

Date Filled Out: 09/01/23  
Date of Bill: 07/15/23

<b>Enter Billing Specifics:</b>		<b><u>System Name</u></b>	<b><u>Detail</u></b>	<b><u>Amount</u></b>	<b><u>Volume</u></b>	<b><u>Rate</u></b>
RESIDENTIAL		Water	Consumption	914.03	16,150	5.6596 Residential
		Water	Fixed	11.37		
		Water	Utility Assist	-		No
		Sewer	Consumption	-	-	6.6632 Consumption
		Sewer	Fixed	-		Standard Fixed
		Public Safety	Fixed	3.00		
		Storm	Fixed	14.39	-	
<b>Original Bill Amount =</b>				<b>942.79</b>		
<b><u>Previous Years Average</u></b>		<b><u>LEAK ADJUSTMENT (50% Leak Amount)</u></b>				
<b><u>Month / Year</u></b>	<b><u>Consumption</u></b>	<b><u>System Name</u></b>	<b><u>Detail</u></b>	<b><u>Amount</u></b>	<b><u>Volume</u></b>	<b><u>Rate</u></b>
07/15/22	1,160	Water	Consumption	409.29	7,232	5.6596
07/15/21	2,440					
07/15/20	1,460					
Average =	1,687	Sewer	Consumption			
				409.29		
Adjustment Dollars: 409.29 Adj Water Volume 7,232 Adj Sewer Volume		<b>Notes:</b> ESTIMATED ADJUSTMENT ***ADJUSTMENT WILL NOT BE FINALIZED UNTIL RECEIPTS AND LEAK ADJUSTMENT FORM ARE PROVIDED. ANYTHING OVER \$1000 NEEDS COUNCIL APPROVAL.				
Finance Director Authorization & Date Above						
Entered By & Date Above						

**LEAK ADJUSTMENT REQUEST - Residential**

Prepared By: Dawn Richardson  
Customer Name: Doug Morten  
Account #: 22-04332-000

Date Filled Out: 09/01/23  
Date of Bill: 08/15/23

<b>Enter Billing Specifics:</b>		<b><u>System Name</u></b>	<b><u>Detail</u></b>	<b><u>Amount</u></b>	<b><u>Volume</u></b>	<b><u>Rate</u></b>
RESIDENTIAL		Water	Consumption	2,148.72	36,860	5.8294 Residential
		Water	Fixed	11.71		
		Water	Utility Assist	-		No
		Sewer	Consumption	-	-	6.6632 Consumption
		Sewer	Fixed	-		Standard Fixed
		Public Safety	Fixed	10.00		
		Storm	Fixed	16.79	-	
<b>Original Bill Amount =</b>				<b>2,187.22</b>		
<b><u>Previous Years Average</u></b>		<b><u>LEAK ADJUSTMENT (50% Leak Amount)</u></b>				
<b><u>Month / Year</u></b>	<b><u>Consumption</u></b>	<b><u>System Name</u></b>	<b><u>Detail</u></b>	<b><u>Amount</u></b>	<b><u>Volume</u></b>	<b><u>Rate</u></b>
08/15/22	2,080	Water	Consumption	971.28	16,662	5.8294
08/15/21	6,970					
08/15/20	1,560					
Average =	3,537	Sewer	Consumption			
				<b>971.28</b>		
Adjustment Dollars: 971.28 Adj Water Volume 16,662 Adj Sewer Volume		<b>Notes:</b> ESTIMATED ADJUSTMENT ***ADJUSTMENT WILL NOT BE FINALIZED UNTIL RECEIPTS AND LEAK ADJUSTMENT FORM ARE PROVIDED. ANYTHING OVER \$1000 NEEDS COUNCIL APPROVAL.				
Finance Director Authorization & Date Above						
Entered By & Date Above						

Bill Date	▽	Begin Read	End Read	Metered Cons
=	=	=	=	
8/22/2023		113,770.00	150,630.00	36,860
7/24/2023		97,620.00	113,770.00	16,150
6/22/2023		96,940.00	97,620.00	680
5/23/2023		96,440.00	96,940.00	500
4/24/2023		95,910.00	96,440.00	530
3/23/2023		95,570.00	95,910.00	340
2/22/2023		95,260.00	95,570.00	310
1/24/2023		94,810.00	95,260.00	450
12/22/2022		93,990.00	94,810.00	820
11/22/2022		93,290.00	93,990.00	700
10/25/2022		92,360.00	93,290.00	930
9/23/2022		90,600.00	92,360.00	1,760
8/24/2022		88,520.00	90,600.00	2,080
7/22/2022		87,360.00	88,520.00	1,160
6/22/2022		86,930.00	87,360.00	430
5/24/2022		86,520.00	86,930.00	410
4/22/2022		86,060.00	86,520.00	460
3/22/2022		85,660.00	86,060.00	400
2/24/2022		85,430.00	85,660.00	230
1/25/2022		84,830.00	85,430.00	600

# CITY OF ST. HELENS UTILITIES



265 Strand Street

St. Helens, OR 97051

Phone: 503-397-6272

Fax: 503-397-3490

Email: [utilitybilling@sthelensoregon.gov](mailto:utilitybilling@sthelensoregon.gov)

## REQUEST FOR BILLING LEAK ADJUSTMENT FORM

The City of St. Helens Utilities has a policy of issuing partial adjustment for water leaks that are repaired by customers in a timely manner. Generally, we expect customers to repair leaks within 10 days of discovery or notification. Adjustments issued are based on your average usage for the same period in previous years. This average is deducted from the total consumption used during the time of the leak and an adjustment 50% of the water loss will be credited to your account.

## DESCRIBE THE REPAIRS OR SPECIFIC CIRCUMSTANCE OF YOUR REQUEST

severed water line  
beneath driveway.

ACCOUNT # \_\_\_\_\_

ACCOUNT NAME: Doug & Ann MORTEN

PHONE NUMBER 503 807 9240

SERVICE ADDRESS: 484 6404 CLIFFS Dr St. Helens OR 97051

MAILING ADDRESS: " " " "

X \_\_\_\_\_

WATER CLERK \_\_\_\_\_

Integrity Concrete & Construction LLC CCB#230118

Reyes Navarro

Eduardo Munoz

940 Wyeth Street

St. Helens, OR 97051

(503) 369-8169

(503) 369-8685

# Invoice

Submitted on 8/17/2023

**Invoice for**

Doug Morten

**Payable to**

Integrity Concrete

**Invoice #**

246

**Project**

Water line

**Due date**

Description	Qty	Unit price	Total price
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Repair main water line			
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Time & Material			
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			\$200.00
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Notes:

Subtotal

\$200.00

Adjustments

**\$200.00**