BEULAH UTILITIES DISTRICT
5320 LEE ROAD 270
VALLEY AL 36854

334-737-5374

HIGH BILL ADJUSTMENT REQUEST FORM

Account #:_____

Name on Account: _____

Service Address: _____

Please explain in detail your leak:

_____

_____

_____

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_____

Date Leak Began: _____ **Date Leak Repaired:** _____

Contact Name & Phone #: _____

Signature: _____

Please attach all copies of invoices/receipts (if available) that shows any work that has been performed at the above service address that was due to the leak described above. Board meetings are every third Tuesday of each month and all request must be submitted 10 days prior to meeting.