

Exhibit "C"

Leak Adjustment Request Form

The filing of this Form does not extend the due date of your bill. Your bill must be paid in full prior to the delinquent date.

Account No. _____

Service Address _____

Daytime Phone No. _____

The Rate Order of _____ Municipal Utility District No. __[, of _____ County, Texas] (the "District") allows for a Leak Adjustment credit because of loss of water through an excusable defect in a customer's water line. An "excusable defect" is a water line rupture or water line leakage caused by weather, settlement, corrosion, wear or accident, which defect has been repaired by the customer. **Visible and/or readily detectable leaks such as, for example, faucet and hose leaks and running toilets, are ineligible.** Credit may be given for one-half of the District's applicable water service rate applied to usage in excess of the customer's average as determined appropriate by the District in its sole discretion. Any Leak Adjustment is limited to a maximum of three (3) consecutive months and must be requested within six (6) months of the repair. Customers may request no more than two (2) Leak Adjustments in any twelve (12) month period.

I, _____, am the Responsible Party for the account at the above service address,
(Give full legal name and/or business identity)

I am familiar with all of the facts stated in this document and they are true and correct. Making false statements on this government record is subject to criminal prosecution under Chapter 37 of the Texas Penal Code. I certify that this request and attached documents contain no false statements.

I am requesting the District adjust the water bills for this account, to the extent allowed by its Rate Order because of a leak beginning on (date) _____ and repaired on (date) _____. During this period, the following additional water appliances (washer, dishwasher, spa, etc., or none) were installed at the service address: _____. The water lost from this leak was not used by anyone.

IN ORDER TO PROCESS YOUR APPLICATION QUICKLY & EFFICIENTLY, PLEASE READ THE FOLLOWING CAREFULLY AND GIVE A COMPLETE AND CLEAR DESCRIPTION OF THE REPAIRS.

Description of leak on customer's side of meter: _____

Description of repair: _____

Attach documentation of the repair date, address, type of repair, and cost. Acceptable documents include plumber's statement/bill, or a receipt for parts. Businesses with in-house maintenance may submit a statement signed by two (2) employees who witnessed the repair. No adjustment will be considered without this documentation.

In all cases, the District retains the right to make field verifications before approving any Leak Adjustment. You will be notified by mail within 90 days whether your request is approved or denied, in whole or in part. Any adjustment granted will appear as a credit on a future bill.

Print Name: _____

Signature: _____

Date: _____

Complete form and return to _____ +++++

+++++ NOTE: Insert Operator contact information.