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SILVER CREEK WATER CORPORATION 1/1

**SILVER CREEK WATER CORPORATION
CERTIFICATION OF LEAK**

1. Name of Member _____
2. Address of Member _____
3. Phone Number _____
4. Date Leak Discovered or Date You Became Aware of Leak: _____
5. Date You Notified Utility of Leak: _____
6. Location of Leak on your property: _____
7. Date Leak Repaired: _____
8. Name & Address of Person/Company that Repaired Leak: _____

NOTE: Attach certification by repairer of location of leak.

9. That I/We have not had a leak adjustment within the past twelve (12) months.

10. That I/We promptly had the leak repaired.

I affirm under the penalties of perjury that the above and foregoing is true and correct.

Dated: _____

Member _____ Member _____

SCW OFFICE USE ONLY

Date Received _____ By _____ Customer Acct No _____

Approved Denied (See Attached) Mgr _____ Date _____

File name: Leak-Adjustment-Request-Form-f-1-1.pdf

Save as type: Adobe Acrobat Document (*.pdf)

Save form to a location on your computer

- After saving the form to your computer, open it fill out the appropriate fields and click save.

Fill out the form below and attach appropriate PDF downloaded from above. If the PDF you are filling out requires a photo ID attach that picture copy to this form.

Name

John Doe

First Last

Date *

7/15/2019

Upload * Upload

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Applicable PDF Photo ID (FRONT)

Fill out your name and todays date on the web form.

SUBMIT

Edit this form

Name

John Doe

First Last

Date *

7/15/2019

Upload * Upload

Browse... Browse...

This field is required

Applicable PDF Photo ID (FRONT)

If you submit a form without attaching a document, you will be met with an error

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Edit this form



Fill out the form below and attach appropriate PDF downloaded from above. If the PDF you are filling out requires a photo ID attach that picture copy to this form.

Name
John Doe
First Last

Date *
7/15/2019

Upload *
Browse...
Applicable PDF

SUBMIT

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Click the following "Browse" button to select your filled-out form.

File name: | All Files (*.*)
Open Cancel

Search for the form you filled out and saved.
Then select open.

Name
John Doe
First Last

Date *
7/15/2019

Upload *
Browse...
Leak-Adjustment-Request-Fo...
Applicable PDF

Upload
Browse...
Photo ID (FRONT)

SUBMIT

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Once you have successfully uploaded your form the name will appear beneath "Browse"



Your form has been sent!

For anymore questions regarding your form you can contact us at (812) 246-2889.

Name

First

Date *

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Browse...

Applicable PDF

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Browse...

Photo ID (FRONT)

Upload
Browse...

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SUBMIT

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Click the "SUBMIT" button at the bottom of the page and you will be met with a confirmation message as shown above.

- If your desired form requires a photo ID you may upload those pictures in the same manner you did the previous form. Simply locate the photos on your computer or phone and upload them.

Fill out the form below and attach appropriate PDF downloaded from above. If the PDF you are filling out requires a photo ID attach that picture copy to this form.

Name

John Doe

First

Date *

7/15/2019

Upload *
Browse...

Applicable PDF

Upload
Browse...

Photo ID (FRONT)

Upload
Browse...

Photo ID (BACK)

SUBMIT

Edit this form

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