

Buchanan County Public Service Authority

P.O. Box 30

Vansant, Va. 24656

Phone: (276) 935-5827 Fax: (276) 935-2400

Email: bcpsa@bcpsa.net

REQUEST FOR MONTHLY BILL ADJUSTMENT

ACCOUNT # _____

NAME: _____

I am requesting an adjustment to the charges for bill dated _____ for the
above referenced account due to a leak. I am also certifying that the leak was repaired on

(Date)

I understand that no further adjustment, due to leaks, will be granted within twelve (12) months from
the bill dated _____.

(Date)

Signature

Date