



Hardin County Water District No. 2

1951 W Park Rd • P.O. Box 970 • Elizabethtown, KY 42702
Telephone (270) 737-1056 • Fax (270) 737-2301 • www.hcwd2.org

VERIFICATION OF LEAK REPAIR

This is to certify that I have repaired a water leak and I am requesting an adjustment for my water bill. I understand that by requesting this adjustment any other leaks that may occur during this calendar year will not qualify for another adjustment.

Customer Name: _____

Address of Leak: _____

Type of Leak: Underground Spigot/Other Commode
 Faucet Other (specify)

Repaired by: _____

Repair date: _____

Other Information:

Customer Signature: _____

Date: _____

Account Number: _____

Clerk: _____