HIGH USAGE CHECK LIST

Name: _____ Today's Date: _____

Address: _____ Account #: _____-_____-_____-___

Contact Phone: _____ Appointment: _____

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QUESTIONNAIRE

1. How many people reside in the home? _____
2. Were they "extra" people this month? _____
3. How many bathrooms in the home? _____
4. Is there a water softener? _____
5. If yes, how often does it recycle? _____
6. Do you have "Hot Water Heat"? _____
7. Have you watered lawn/garden? _____
8. Have you filled swimming pool? _____
9. Have you washed vehicles? _____
10. How many outside spigots are there? _____
11. Are you aware of any leaks that were recently fixed or need fixing? _____

USAGE INFORMATION

Date of last meter reading: _____

Type of last reading: ACTUAL or ESTIMATED

What was the last reading: _____

What was the usage for the past 5 months?

USAGE MONTH	AMOUNT OF USAGE	TYPE OF REAI

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ADDITIONAL COMMENTS FROM CUSTOMER PERTAINING TO THE HIGH USAGE AND ANYTHING THAT MAY HAVE CAUSED IT: _____

D.P.W. FINDINGS:

Checked on _____,19____. Meter Reading Today was: _____.

Other Findings: _____

_____. CHECKED BY: _____

UTILITY PROCESSING ACTION:

BY: _____ DATE: _____

WE DO NOT GIVE CREDITS FOR LEAKS!!!

SOMEONE MUST BE PRESENT AT THE HOME AT TIME OF THE APPOINTMENT!!!