

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: September 2024

Total Number of Request for Adjustment	Total Number of Adjustments Approved
Highest Bill Adjusted	Lowest Bill Adjusted
Total Gallons Adjusted	Total Cost of Adjustments

DETAILS

Customer Name	Shunkika Cokely	Customer Address	707 Sanders
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	*730.89	Usage:	388
Average Bill:	*83.26	Three Month Average Usage:	35
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*311.87	Adjusted Bill Amount:	*419.02
Customer Name	Mid State Golf	Customer Address	24206 I-30
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	*589.43	Usage:	772
Average Bill:	*343.33	Three Month Average Usage:	388
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*131.52	Adjusted Bill Amount:	*457.91
Customer Name	Ron Abrahams	Customer Address	2616 Carywood
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	4/24
Amount of Bill:	*565.78	Usage:	304
Average Bill:	*50.25	Three Month Average Usage:	23
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*248.26	Adjusted Bill Amount:	*317.52
Customer Name	Wanda Simington	Customer Address	2500 Paisy CV
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	*296.89	Usage:	259
Average Bill:	*46.95	Three Month Average Usage:	28
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*124.97	Adjusted Bill Amount:	*171.92
Customer Name	James Martin	Customer Address	2524 Mills Park
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	*373.14	Usage:	193
Average Bill:	*140.13	Three Month Average Usage:	66
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*112.20	Adjusted Bill Amount:	*260.94

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Total Gallons Adjusted	Total Cost of Adjustments

DETAILS

Sewer Only	Customer Name	Donald Williams	Customer Address	11034 Stonehill
	Date Leak Detected by AMI		Date Customer Notified	
	Date Leak Started		Date Leak Repaired	9/24
	Amount of Bill:	*473.20	Usage:	394
	Average Bill:	*156.17	Three Month Average Usage:	101
	Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
	Amount of Adjustment to Sewer Bill:	*158.51	Adjusted Bill Amount:	*314.69
	Customer Name	Jennifer Evans	Customer Address	23 Parkview
	Date Leak Detected by AMI		Date Customer Notified	
	Date Leak Started		Date Leak Repaired	8/24
	Amount of Bill:	*420.84	Usage:	219
	Average Bill:	*88.76	Three Month Average Usage:	38
	Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
	Amount of Adjustment to Sewer Bill:	*159.91	Adjusted Bill Amount:	*260.93
	Customer Name	Leo Baker	Customer Address	3209 Greenfield
	Date Leak Detected by AMI		Date Customer Notified	
	Date Leak Started		Date Leak Repaired	8/24
	Amount of Bill:	*317.76	Usage:	172
	Average Bill:	New Customer	Three Month Average Usage:	20
	Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
	Amount of Adjustment to Sewer Bill:	*134.29	Adjusted Bill Amount:	*183.47
	Customer Name	Charles Rodgers	Customer Address	3502 Stivers
	Date Leak Detected by AMI		Date Customer Notified	
	Date Leak Started		Date Leak Repaired	8/24
	Amount of Bill:	*686.86	Usage:	370
	Average Bill:	*44.74	Three Month Average Usage:	20
	Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
	Amount of Adjustment to Sewer Bill:	*309.22	Adjusted Bill Amount:	*377.64
	Customer Name	Doyle Jordan	Customer Address	208 N. Laurel
	Date Leak Detected by AMI		Date Customer Notified	
	Date Leak Started		Date Leak Repaired	7/24
	Amount of Bill:	*466.70	Usage:	250
	Average Bill:	*79.60	Three Month Average Usage:	39
	Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
	Amount of Adjustment to Sewer Bill:	*186.41	Adjusted Bill Amount:	*280.29

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

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DETAILS

Customer Name	Floyd Bonnette	Customer Address	6233 Hwy 5 N
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	8/24
Amount of Bill:	\$283.23	Usage:	144
Average Bill:	\$55.74	Three Month Average Usage:	120
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$109.55	Adjusted Bill Amount:	\$173.68
Customer Name	Jearrel Boyette	Customer Address	610 SE 2nd St
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	\$881.33	Usage:	470
Average Bill:	\$130.96	Three Month Average Usage:	61
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$361.34	Adjusted Bill Amount:	\$519.99
Customer Name	Jose Barrientos	Customer Address	704 Prickett Rd
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/24
Amount of Bill:	\$1,661.05	Usage:	895
Average Bill:	\$105.27	Three Month Average Usage:	47
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$749.20	Adjusted Bill Amount:	\$911.85
Customer Name		Customer Address	
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:		Usage:	
Average Bill:		Three Month Average Usage:	
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:		Adjusted Bill Amount:	
Customer Name		Customer Address	
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:		Usage:	
Average Bill:		Three Month Average Usage:	
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:		Adjusted Bill Amount:	

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24 Service Account No.: 001-00556-05
 Customer Name: Shunkeka Cokely Home Phone: _____
 Service Address: 707 Sanders Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/19/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired: *Attach plumbing invoice or receipts for repair parts*

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

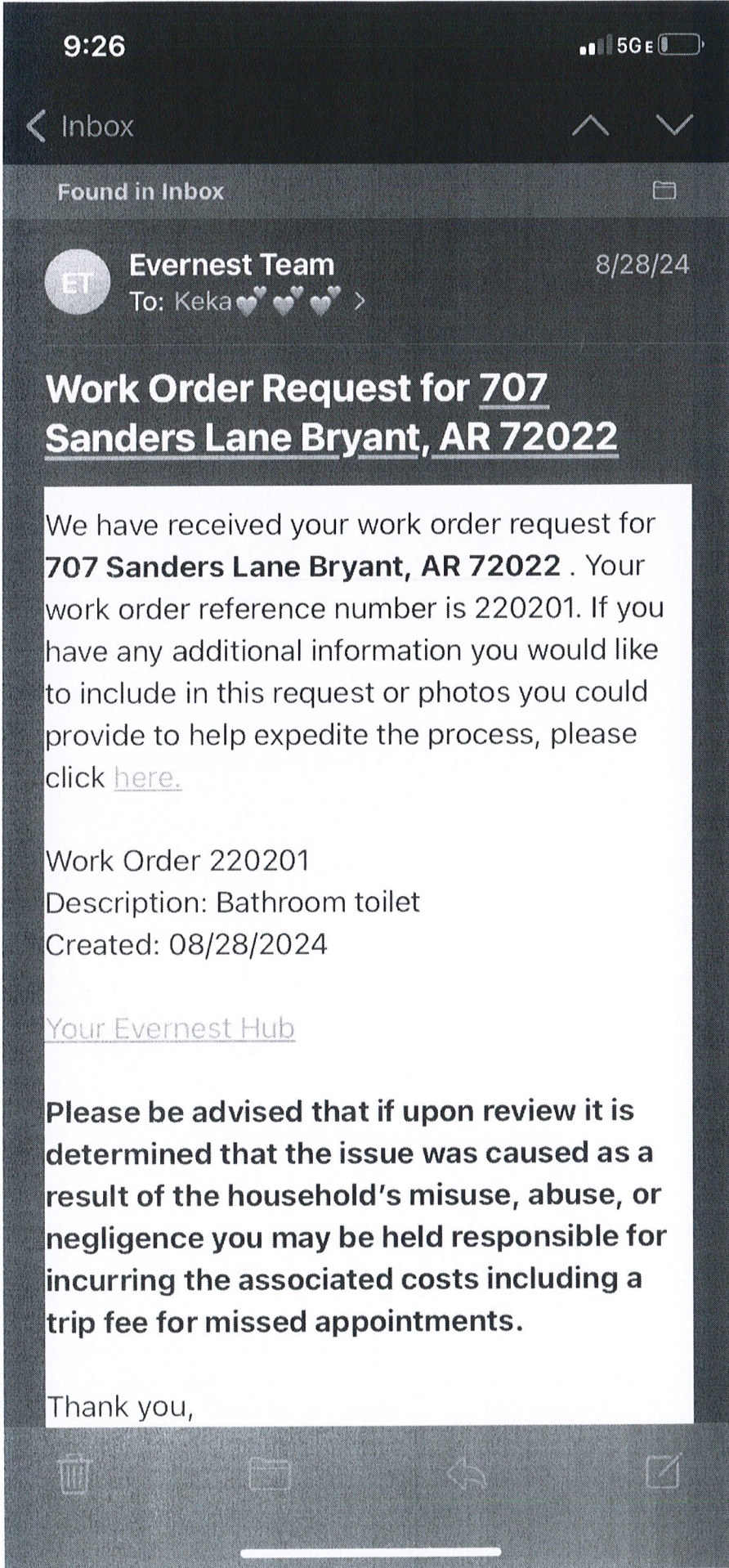
Amount of Bill	\$730.89	Usage	388
Average Bill	\$83.26	Three Month Average Usage	35
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	\$311.87	Adjusted Bill Amount	\$419.02
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Amt.	

Customer Service Manager _____

F3276823

001-00556-05

leak adjustment



9:25

5G E

< Inbox



Evernest Team

9/10/24

To: Keka 🍷🍷🍷 >

Work Order 220201 has been completed

Work order #220201 has been completed.
Please click [here](#) to rate your experience.
Description: Bathroom toilet : The toilet is running handle or chain. Need to be replaced.
Completed: 09/09/2024

Thank you,

Team Evernest

W evernest.co

E communications@evernest.co

[Buy](#) | [Sell](#) | [Manage](#)



[*:m220201]



CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24
 Customer Name: Mid-State Golf
 Service Address: 24206 T-30
 City: Alexander
 Date Leak Detected: _____
 Service Account No.: 101-05242-00
 Home Phone: _____
 Work Phone: _____
 State, Zip: AR 72002
 Date Repaired: 9.24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Faucet Leaking

Explanation of how leak was repaired: *Attach plumbing invoice or receipts for repair parts*

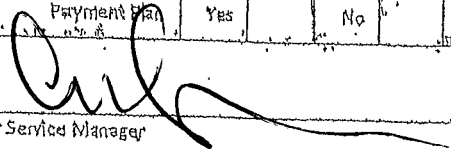
Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

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Amount of Bill	\$ 589.43	Usage	772
Average Bill	\$ 343.33	Three Month Average Usage	388
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved by:	
Amount of Adjustment to Sewer Bill	\$ 131.52	Adjusted Bill Amount	\$ 457.91
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Att.	

Customer Service Manager 



Kara White *501-765-5250 24206*
 23920 Interstate 30 Frontage Road
 Bryant, AR 72022

(501) 765-5250
 bmexcavating@sbcglobal.net

101-05242-00
~~*101-05242-00*~~
 Received in Afternoon mail *8/23/24*

JOB	#4308
SERVICE DATE	Jul 22, 2024
PAYMENT TERMS	Upon receipt
DUE DATE	Jul 21, 2024
AMOUNT DUE	\$3,125.00

CONTACT US
 15811 Hammond Rd
 Little Rock, AR 72210

(501) 607-6596
 whittenplumbing501@gmail.com

INVOICE

Services	amount
Run 240' water service Disconnect existing water supply to separate building water supplys. Run new 1" pvc water service from meter to building. Install ball valve at meter. Install 3/4 ball valve at building. Convert to pex and connect at building. Check for leaks.	\$2,475.00
Install water piping to hosebibs Run new piping to reconnect water to existing hosebib piping.	\$650.00

Subtotal	\$3,125.00
Job Total	\$3,125.00
Amount Due	\$3,125.00

See our [Terms & Conditions](#)

Leak not fixed 8-27-24

101-05242-00
MID-STATE GOLF

B&M EXCAVATING
PO BOX 337
BRYANT, AR 72089

Invoice

Date	Invoice #
9/12/2024	1481

Bill To
R&R Properties LLC PO Box 337 Bryant, AR 72089

Terms	Project
Due on receipt	Mid State Golf

Serviced	Quantity	Description	Rate	Amount
9/10/2024	8	hrs, Mini Ex-compacto to dig water line from water entrance into buidling to where line was busted at front water facuet	125.00	1,000.00
9/10/2024	8	hrs, Labor	35.00	280.00
9/10/2024	1	Plumbing Supplies to repair leak at front facuet and install new shut off at this location	140.52	140.52
9/10/2024	1	hrs, Dozer Work to smooth out where water line was dug and spread existing SB2 back into gravel areas	125.00	125.00
			Total	\$1,545.52

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24 Service Account No.: 101-07029-01
 Customer Name: Reh. Abraham Home Phone: _____
 Service Address: 2616 Carwood Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 4/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Service Line leaking in front of meter

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	\$565.78	Usage	304
Average Bill	\$50.25	Three Month Average Usage	23
Adjustment Approved	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill	\$248.26	Adjusted Bill Amount	\$317.52
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Amt.	

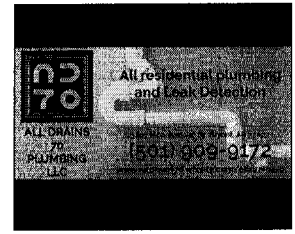
[Signature]
Customer Service Manager

101-07029-01

INVOICE

All Drains 70 Plumbing LLC
3207 Meadowlake Dr
Bryant, AR 72022-8122

alldrains70@gmail.com
501-909-9172



Bill to

Ron Abrahams
2616 Carywood Dr. Bryant, AR 72022

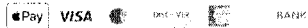
Invoice details

Invoice no.: 2558656
Invoice date: 04/29/2024
Due date: 04/29/2024

#	Date	Product or service	Description	Qty	Rate	Amount
1.		Service	repaired leak in front of water meter that was causing an increased water bill due to meter constantly spinning.		\$275.00	\$275.00

Total \$275.00

Ways to pay



Overdue 04/29/2024

Note to customer

Thank you for your business.



CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24 Service Account No.: 003-08330-03
 Customer Name: Wanda Simington Home Phone: _____
 Service Address: 2500 Daisy Cv Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Service Line Leaking

Explanation of how leak was repaired; Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

• You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
 • If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	<u>296.89</u>		Usage	<u>259</u>
Average Bill	<u>46.95</u>		Three Month Average Usage	<u>28</u>
Adjustment Approved	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	<u>124.97</u>		Adjusted Bill Amount	<u>171.92</u>
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	<input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/> 12 Months
				Payment Amt. _____

[Signature]
Customer Service Manager

Wanda Simington -



CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24 Service Account No.: 001-00805-11
 Customer Name: Jane Martin Home Phone: _____
 Service Address: 2524 Mills Park Work Phone: _____
 City: Bryant State, Zip: AR 72023
 Date Leak Detected: _____ Date Repaired: 9/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____ swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
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Amount of Bill		373.14		Usage		193	
Average Bill		140.13		Three Month Average Usage		66	
Adjustment Approved		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Approved by:			
Amount of Adjustment to Sewer Bill		112.20		Adjusted Bill Amount		5260.94	
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.	

Customer Service Manager _____

001-00805-11

501-412-1650
501-317-9012

mylowe's Rewards



LEARN MORE AT LOWES.COM/MYLOWESREWARDS

LOVE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLAN02 2362227 TRANS#: 148114658 09-09-24

1030995 KORKY FILL VALVE AND FLAP	16.48
SUBTOTAL:	16.48
TOTAL TAX:	1.63
INVOICE 88640 TOTAL:	18.11
CASH:	20.00
CHANGE:	1.89

STORE: 2471 TERMINAL: 38 09/09/24 15:47:36

OF ITEMS PURCHASED: 1

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOVE'S.
FOR DETAILS ON OUR RETURN POLICY, VISIT
LOWES.COM/RETURNS
A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

MY LOWE'S REWARDS CREDIT CARDHOLDERS GET MORE.
FOR DETAILS VISIT LOWES.COM/MYLOWESREWARDS

* SHARE YOUR FEEDBACK! *

* ENTER FOR A CHANCE TO BE *

* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *

* ENTRE EN EL SORTEO MENSUAL *

* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *

* ENTER BY COMPLETING A SHORT SURVEY *

* WITHIN ONE WEEK AT: www.lowes.com/survey *

* YOUR ID #886408 247142 534806 *

* NO PURCHASE NECESSARY TO ENTER OR WIN. *

* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *

* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

STORE: 2471 TERMINAL: 38 09/09/24 15:47:36

**CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST**

Date of Request: 9/24 Service Account No.: 003-0857701
 Customer Name: Donald Williams Home Phone: _____
 Service Address: 11034 Stonehill Ln Work Phone: _____
 City: Alexander State, Zip: AR 72003
 Date Leak Detected: _____ Date Repaired: 9/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired; Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

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Average Bill	156.17		Three Month Average Usage	101	
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Amount of Adjustment to Sewer Bill	158.51		Adjusted Bill Amount	314.69	
Payment Plan	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months
			Payment Amt.		

Customer Service Manager [Signature]

Acct # 003-08577-01

11034 Stonehill Dr.

J. Dodson Plumbing LLC

7415 Mars Hill Road
Bauxite, AR 72011
Owner: Jeremy Dodson
501-909-2540

INVOICE


4878

Date: 8-16-24

Customer Name: Dad Williams
Address: 11034 Stonehill
Meraden, Ar 72002

Description	Price
Pumped toilet in	
Apt, Redstart 2	
wood floor. Melaments,	
floor tabs in	
home	
Dad # Cash	

Sub Total:
Tax:
Total Due: 397.60


Signature

Checks: Payable to J. Dodson Plumbing LLC
Cashapp: \$jdodsonplumbing
Please note the invoice number on payment.

Thank You for Your Business!

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 8/24 Service Account No.: 102-00158-01
 Customer Name: Jennifer Evans Home Phone: _____
 Service Address: 23 Parkview Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 8/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Service Line Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

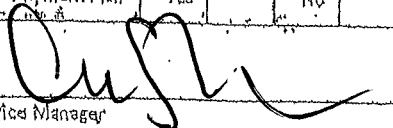
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Average Bill	\$88.76	Three Month Average Usage	38
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	\$159.91	Adjusted Bill Amount	\$260.93
Payment Plan	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months
		Payment Amt.	

Customer Service Manager 

Next month



Acct# 102-00158-01

Barnard Plumbing LLC – PO Box 632, Sheridan AR 72150

19522 Arch Street
Little Rock, AR 72206
501-500-0301
870-484-4800

To whom it may concern:

Customer: Mrs. Jennifer Evans
Address: 23 Parkview Drive, Bryant, AR 72022

Mrs. Evans called our office on 8/12/24 with concerns of a very high water bill. Customer was scheduled 8/13/24 for assessment. Plumbers found a leak on the water service line. We replaced a section of water line down from customer's side of water meter. This solved the issue of additional water usage. This break in the water service line caused a substantially amount of wasted water and could potentially cause a noticeable difference in her water usage charges.

Please consider adjusting her bill accordingly. We appreciate your assistance with this matter.

Kindly,

Misty Barnard.
Barnard Plumbing LLC
501-500-0301
President



501.500.0301
870.484.4800



dbarnardplumbing@gmail.com
mbarnardplumbing@gmail.com



19522 Arch Street
Little Rock, AR 72206

**CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST**

Date of Request: 9/24 Service Account No.: 101-02236-01
 Customer Name: Leo Baker Home Phone: _____
 Service Address: 3209 Grinstead Work Phone: _____
 City: Bryant State, Zip: AR 72032
 Date Leak Detected: _____ Date Repaired: 8/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Service Line Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

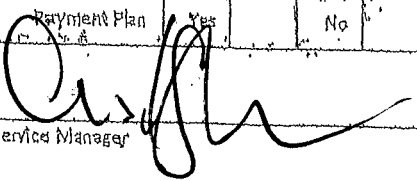
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Amount of Bill:	\$317.76	Usage:	172
Average Bill:	New Customer	Three Month Average Usage:	
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved by:	
Amount of Adjustment to Sewer Bill:	\$134.29	Adjusted Bill Amount:	\$183.47
Payment Plan:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Payment Period:	<input checked="" type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months
		Payment Amt:	

Customer Service Manager 

101-02236-01

903-908-2237



Invoice

Ray Lusk Plumbing
921 Rushing Circle
Little Rock, AR 72204
(501)664-0940 Fax: (501)661-1264
NWA-(479)306-7775

08/19/24
Page 1

LEO BAKER
3209 GREENFIELD DR
BRYANT, AR 72022

LEO BAKER
3209 GREENFIELD DR
BRYANT, AR 72022

Call Slip Number	Invoice Date	Invoice Number	Due Date
162876	08/19/2024	S298622	08/29/2024

Tech	Date
TD	08/19/2024
DAVI	08/19/2024

Qty	Description	Unit Price	Amount
(1)	REPAIR LEAK IN 3/4" PLASTIC SERVICE	420.44	420.44

ADDITIONAL DETAILS:

Repaired leak on 3/4 pvc service at the meter. Was leaking where the copper switched to pvc. Made repair and turned the water back on. Blew the air out at the hose bib. Checked the meter and it was sitting still. Also tightened down the packing nut on the hose bib in the back.

I the undersigned, an owner/authorized representative/tenant of the premises at which the work mentions is to be done. I hereby authorize you to perform Diagnosis/solution, and to use such labor and materials as you deem advisable at the price listed above. I agree to pay \$25 per month for each past due invoice in the event that collection efforts are initiated against me, I shall pay for all associated fees or cost by the addition of my signature below, I agree that I have received a copy of this contract, notice to the owner, and that I have read, understand, and agree to the terms listed herein. . I acknowledge satisfactory completion of the described work, and that the premises have been left in a satisfactory condition.

08/19/2024 12:14PM

Total Due: 420.44
Received: 420.44

Balance Due: 0.00

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 8.12.4 Service Account No.: 102-02376-00
 Customer Name: Charles Rodgers Home Phone: _____
 Service Address: 3502 Stevens Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 8.12.4

Description of Cause of Leak (faucet, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

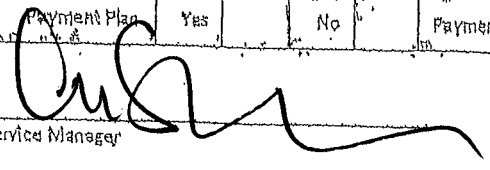
Sworn Statement:

I _____ swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	\$686.86	Usage	370
Average Bill	44.74	Three Month Average Usage	20
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved by:	
Amount of Adjustment to Sewer Bill	\$309.22	Adjusted Bill Amount	\$377.64
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Amt.	

Customer Service Manager 

8-30-24

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LOWE'S HOME CENTERS, LLC
1325 HIGHWAY 64 W
CONWAY, AR 72032 (501) 513-3300

- SALE -

SALES#: FSTLAN01 2209546 TRANS#: 837823080 08-29-24

21398 KORRY PLUS TOILET FLAPPER 5.48

SUBTOTAL: 5.48

TOTAL TAX: 0.48

INVOICE 92553 TOTAL: 5.96

DEBITVISA: 5.96

CHANGE: 0.00

DEBITVISA: XXXXXXXXXXXX3944 AMOUNT: 5.96 AUTHCD: 113076

TAP REFID: 023613553149 08/29/24 21:09:56

*PIN VERIFIED

TRACE : 553149 RETRIEVAL: 023613553149

PURCHASE CASH BACK TOTAL DEBIT

5.96 0.00 5.96

TVR : 0000000000

AID : A0000000980840

102-
02376-00
Charles + James
Rodgers

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 8/24 Service Account No.: 102-00329-00
 Customer Name: Doyle, Jordan Home Phone: _____
 Service Address: 208 N. Laurel Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 7/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Ice maker leaking under home

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	466.70		Usage	250
Average Bill	79.60		Three Month Average Usage	39
Adjustment Approved	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	186.41		Adjusted Bill Amount	280.29
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
			Payment Amt.	

Customer Service Manager

501-353-8140

SERVICE SOLUTIONS PLUMBING PLUMBING INVOICE

P.O.Box 265
Sheridan, AR 72150
Office: 870.942.5023

Acct# 102-00329-00

INVOICE # **14984**

DATE 7/18/24

BILLING:

NAME Sordan SMALL MACHINE _____ LARGE MACHINE _____

ADDRESS 208 N Laurel STATE _____ ZIP _____ CAMERA _____ TRACTOR _____

CITY Bryant STATE AR ZIP _____ EQUIPMENT _____

PHONE 501-353-8140

WORK ORDER

QTY.	ITEM OR PART	UNIT	AMOUNT	DESCRIPTION OF REPAIRS	LABOR	HRS	RATE	AMT
1	3/4 valve		17.33	installed shut-off valve outside of home. we capped line going to ice maker that was leaking under home				
1	1/4 plug		8.23					
			25.55					
					Jerry DT	.5		
					LT	2		
PAID BY:								
					<input type="checkbox"/> CHECK			TOTAL MATERIALS <u>25</u> <u>95</u>
					<input type="checkbox"/> CASH			TOTAL LABOR <u>210</u> <u>46</u>
					<input type="checkbox"/> CHARGE CARD			TRIP AMOUNT <u>45</u> <u>10</u>
					AMOUNT \$ _____			EQUIP CHARGES _____
							TAXES _____	
							TOTAL <u>390.</u> <u>55</u>	

TERMS
I have authority to order the work outlined above which has been satisfactorily completed. I agree that Seller retains title to equipment/materials furnish until final payment is made. If payment is not made as agreed, Seller can remove said equipment/materials at Seller's expense. Any damage resulting from said removal shall not be the responsibility of Seller.

CUSTOMER SIGNATURE [Signature] DATE 7-18-24 Thank You

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24 Service Account No.: 001-07292-00
 Customer Name: Ehud Bonnet Home Phone: _____
 Service Address: 6233 HWY 5 N Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 8/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	* 283.23		Usage	144
Average Bill	55.74		Three Month Average Usage	220
Adjustment Approved	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	* 109.55		Adjusted Bill Amount	173.68
Payment Plan	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months
			Payment Amt.	

Customer Service Manager _____

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LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: S2471L61 2243254 TRANS#: 356474686 08-15-24

5619673 ASD CHAMP EL CH 1.6-GPF (199.00

SUBTOTAL:	199.00
TOTAL TAX:	19.65
INVOICE 81476 TOTAL:	218.65
M/C:	218.65

NC: XXXXXXXXXXXX0984 AMOUNT: 218.65 AUTHCD: 019212
CHIP REF ID: 247101476877 08/15/24 10:27:27
APL : CAPITAL ONE TVR : 000008000
TST : E800

STORE: 2471 TERMINAL: 01 08/15/24 10:27:39

NO. OF ITEMS PURCHASED: 1
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'S.
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LOWES.COM/RETURNS
A WRITTEN COPY OF THE RETURN POLICY IS AVAILABLE
AT OUR CUSTOMER SERVICE DESK

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FOR DETAILS VISIT LOWES.COM/MYLOWESREWARDS

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* ENTER FOR A CHANCE TO BE *
* ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *
* ENTRE EN EL SORTEO MENSUAL *
* PARA SER UNO DE LOS CINCO GANADORES DE \$500! *
* *
* ENTER BY COMPLETING A SHORT SURVEY *
* WITHIN ONE WEEK AT: www.lowes.com/survey *
* Y O U R I D #814761 247112 282751 *
* *
* NO PURCHASE NECESSARY TO ENTER OR WIN. *
* VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *
* OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *

Floyd Bonnette

501-860-1613

001-07292-00

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24
 Customer Name: Jearnel Bayette
 Service Address: 610 SE 2nd St
 City: Bryant
 Date Leak Detected: _____
 Service Account No.: 001-05200-06
 Home Phone: _____
 Work Phone: _____
 State, Zip: AR 72022
 Date Repaired: 9/24

Description of Cause of Leak (fouceset, toilet, underground, etc.):

Toilet Leaking

Explanation of how leak was repaired: Attach plumbing invoice or receipts for repair parts

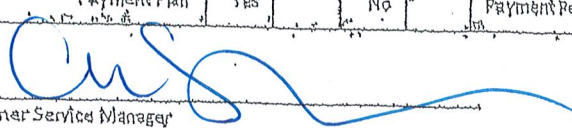
Sworn Statement:

I _____ swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	* 881.33	Usage	470
Average Bill	* 130.96	Three Month Average Usage	61
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	* 361.34	Adjusted Bill Amount	* 519.99
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Amt	


Customer Service Manager

501-412-8335

001-05200-06

mylowe's Rewards



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LOWE'S HOME CENTERS, LLC
2330 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLAN03 3738674 TRANS#: 814572439 09-12-24

2749134 PS PROFLS EL CH WH DF(806	198.00
2 @ 99.00	
751667 3/8-IN X 16-IN SS-TL (388	14.36
2 @ 7.18	

SUBTOTAL:	212.36
TOTAL TAX:	20.97
INVOICE 96056 TOTAL:	233.33
DEBITMC:	233.33
CHANGE:	0.00

DEBITMC: XXXXXXXXXXXX6795 AMOUNT: 233.33 AUTHCD: 075113

TAP REFID:247142056722 09/12/24 17:51:10

*PIN VERIFIED

TRACE : 056722 RETRIEVAL: 247142056722

PURCHASE	CASH BACK	TOTAL DEBIT
233.33	0.00	233.33

TUR : 0000048001

AID : A0000000042203

STORE: 2471 TERMINAL: 42 09/12/24 17:51:15

OF ITEMS PURCHASED: 4

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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*	SHARE YOUR FEEDBACK!	*
*	ENTER FOR A CHANCE TO BE	*
*	ONE OF FIVE \$500 WINNERS DRAWN MONTHLY!	*

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 9/24
 Customer Name: Jose Barrionto
 Service Address: 704 Frickett Rd.
 City: Bryant
 Date Leak Detected: _____
 Service Account No.: 001-00836-01
 Home Phone: _____
 Work Phone: _____
 State, Zip: AR 72022
 Date Repaired: 9/24

Description of Cause of Leak (faucet, toilet, underground, etc.):

Busted Water Line

Explanation of how leak was repaired: *Attach plumbing invoice or receipts for repair parts*

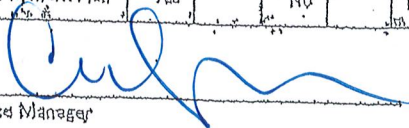
Sworn Statement:

I, _____, swear or affirm that the above and foregoing representations are true and correct to the best of my information, knowledge, and belief.

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
- If you are dissatisfied with the decision of the WSAC you have the right to appear before the Bryant City Council for a final decision.

Amount of Bill	<u>1,661.05</u>	Usage	<u>895</u>
Average Bill	<u>105.27</u>	Three Month Average Usage	<u>47</u>
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	<u>749.20</u>	Adjusted Bill Amount	<u>911.85</u>
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Payment Amt.	

Customer Service Manager 

C Avila Construction
PO BOX 241910
LITTLE ROCK, AR 72223 US
+1 5013503299
c.avilaconstruction@gmail.com

Invoice

BILL TO
Jose Barrientos
704 Prickett Rd
Bryant, Arkansas 72022

INVOICE #	DATE	TOTAL DUE	DUE DATE	TERMS	ENCLOSED
1878	09/12/2024	\$500.00	10/01/2024	Due on receipt	

P.O. NUMBER
704 Prickett Rd

DATE	ACTIVITY	DESCRIPTION	QTY	RATE	AMOUNT
	14 Plumbing	Repair busted water line by basement/ garden Labor and material Emergency trip fee	1	500.00	500.00

SUBTOTAL 500.00
TAX 0.00
TOTAL 500.00
BALANCE DUE **\$500.00**

001-00836-01

~~501-912-8420~~
501-912-0430
501-350-3299