

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: January 2022

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	Ke:th Alsip	Customer Address	603 Bristol Dr
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-13-22
3 months Amount of Bill:	*736.58	Usage:	451
Average Bill:	*49.94	Three Month Average Usage:	34
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*345.85	Adjusted Bill Amount:	*390.73
Customer Name	Kelly W. Kerson	Customer Address	603 Shobe Rd.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	12-21-21
3 months Amount of Bill:	*776.84	Usage:	456
Average Bill:	*75.83	Three Month Average Usage:	43
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*324.05	Adjusted Bill Amount:	*452.79
Customer Name	Charlexis James	Customer Address	1201 Edgewood
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-11-22
3 months Amount of Bill:	*921.33	Usage:	542
Average Bill:	*72.48	Three Month Average Usage:	41
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*415.22	Adjusted Bill Amount:	*506.11
Customer Name	Kimberly Lee	Customer Address	708 Pattywood
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-15-22
3 months Amount of Bill:	*689.48	Usage:	404
Average Bill:	*37.20	Three Month Average Usage:	19
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*343.87	Adjusted Bill Amount:	*345.61
Customer Name	Billy Heavner	Customer Address	2316 Raintree
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-13-22
2 months Amount of Bill:	*697.63	Usage:	411
Average Bill:	*66.65	Three Month Average Usage:	40
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*328.02	Adjusted Bill Amount:	*369.61

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

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Total Gallons Adjusted	Total Cost of Adjustments

DETAILS

Customer Name	Yoshalan Rone	Customer Address	902 Ruth Dr.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-11-22
<u>2 months</u> Amount of Bill:	*511.17	Usage:	300
Average Bill:	*90	Three Month Average Usage:	52
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*194.23	Adjusted Bill Amount:	*316.94
Customer Name	Teresa Whitwell	Customer Address	301 Monticello
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	10/17/21
<u>3 months</u> Amount of Bill:	*1,060.61	Usage:	625
Average Bill:	*80.00	Three Month Average Usage:	43
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*491.53	Adjusted Bill Amount:	*569.08
Customer Name	Suzy Barnett	Customer Address	3214 Meadowlake
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	10/21
<u>3 months</u> Amount of Bill:	*524.84	Usage:	306
Average Bill:	*48.00	Three Month Average Usage:	26
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*225.94	Adjusted Bill Amount:	*298.90
Customer Name	Nicoles Chinchurata	Customer Address	614 SE 2nd St.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-7-22
<u>2 months</u> Amount of Bill:	*1,136.11	Usage:	652
Average Bill:	*95.00	Three Month Average Usage:	57
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*533.15	Adjusted Bill Amount:	*602.96
Customer Name	Miy'Esha Ponds	Customer Address	2124 Jon Dr.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-10-22
<u>3 months</u> Amount of Bill:	*951.54	Usage:	560
Average Bill:	*158.00	Three Month Average Usage:	92
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*281.44	Adjusted Bill Amount:	*670.10

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

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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	Nakita Brown		Customer Address	111 SW 3 rd St.
	Date Leak Detected by AMI			Date Customer Notified	
	Date Leak Started			Date Leak Repaired	12/21/22
2 months	Amount of Bill:	810.20		Usage:	478
	Average Bill:	37.20		Three Month Average Usage:	12
	Adjustment Approved:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Amount of Adjustment to Sewer Bill:	449.91		Adjusted Bill Amount:	360.29
	Customer Name	Karen Bragg		Customer Address	2300 Greenleaf P.
	Date Leak Detected by AMI			Date Customer Notified	
	Date Leak Started			Date Leak Repaired	1/5/22
3 months	Amount of Bill:	518.12		Usage:	302
	Average Bill:	55.00		Three Month Average Usage:	33
	Adjustment Approved:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Amount of Adjustment to Sewer Bill:	201.15		Adjusted Bill Amount:	316.97
	Customer Name	Deana Wawak		Customer Address	503 Center
	Date Leak Detected by AMI			Date Customer Notified	
	Date Leak Started			Date Leak Repaired	1-13-22
3 months	Amount of Bill:	907.88		Usage:	534
	Average Bill:	80.00		Three Month Average Usage:	49
	Adjustment Approved:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Amount of Adjustment to Sewer Bill:	383.50		Adjusted Bill Amount:	524.38
	Customer Name	Madaline Meathe		Customer Address	2419 Ramond Ln
	Date Leak Detected by AMI			Date Customer Notified	
	Date Leak Started			Date Leak Repaired	12/20/21
3 months	Amount of Bill:	420.48		Usage:	419
	Average Bill:	60.00		Three Month Average Usage:	60
	Adjustment Approved:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Amount of Adjustment to Sewer Bill:	236.84		Adjusted Bill Amount:	183.64
	Customer Name	Ty Mathis		Customer Address	3902 Millbrook
	Date Leak Detected by AMI			Date Customer Notified	
	Date Leak Started			Date Leak Repaired	1-11-22
3 months	Amount of Bill:	453.99		Usage:	264
	Average Bill:	54.00		Three Month Average Usage:	33
	Adjustment Approved:	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>
	Amount of Adjustment to Sewer Bill:	163.50		Adjusted Bill Amount:	290.49

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-14-22 Service Account No.: 000488-000
 Customer Name: Keith Alsip Home Phone: 501-303-7019
 Service Address: 603 Bristol Dr Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 1-13-22

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

Leak in pipe under porch

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.

FOR OFFICE USE ONLY										
<u>3 months</u>	Amount of Bill:	<u>*736.58</u>				Usage:	<u>451</u>			
	Average Bill:	<u>*49.94</u>				Three Month Average Usage:	<u>34</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes		<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>*345.85</u>				Adjusted Bill Amount: <u>*390.73</u>				
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.	<input type="checkbox"/>

Chris Beard
Customer Service Manager

Ac# 000488 = 000

Water Department

Water leak at 603 Bistral in back
yard under porch I dug it up
a repaired it. Put a cap over
where the leak was at.

501 303 - 7014
Don Huffman

Aisla
Household

Don Huffman

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-14-22 Service Account No.: 009775-000
 Customer Name: Kelly Wilkerson Home Phone: 680-7396
 Service Address: 603 Shobe Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 12-21-21

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

314 PVC 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.

FOR OFFICE USE ONLY									
<u>3 months</u>	Amount of Bill:	<u>776.84</u>			Usage:	<u>456</u>			
	Average Bill:	<u>75.83</u>			Three Month Average Usage:	<u>43</u>			
	Adjustment Approved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>324.05</u>			Adjusted Bill Amount:	<u>452.79</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.		

Vincent Separd
Customer Service Manager

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 1-12-22 Service Account No.: 028613-001
 Customer Name: Charles James Home Phone: 653-9811
 Service Address: 1201 Edgewood Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-11-22

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

314 water main 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.

FOR OFFICE USE ONLY									
<u>3 months</u>	Amount of Bill:	<u>\$921.33</u>			Usage:	<u>542</u>			
	Average Bill:	<u>\$72.48</u>			Three Month Average Usage:	<u>41</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>\$415.22</u>			Adjusted Bill Amount:	<u>\$506.11</u>			
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Chris Steppard
 Customer Service Manager

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-18-22 Service Account No.: 024512-001
 Customer Name: Kimberly Lee Home Phone: 479-856-2456
 Service Address: 708 Pattwood Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-15-22

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

Toilet Leaking
Shower Dripping

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.

FOR OFFICE USE ONLY									
<u>3 months</u>	Amount of Bill:	<u>\$689.48</u>			Usage:	<u>404</u>			
	Average Bill:	<u>\$37.20</u>			Three Month Average Usage:	<u>19</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>\$343.87</u>			Adjusted Bill Amount:	<u>\$345.61</u>			
	Payment Plan	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt.		

Kimberly Lee
Customer Service Manager

**RightAway
Plumbing, Inc.**

7 Cottonwood Ct
Little Rock Ar
(501) 563-0082 72211

INVOICE

INVOICE DATE: 1-15-22
INVOICE NO. 001015022
PAGE: 1
PRODUCT: _____
SUBMITTED BY: _____ RR
PAY THIS AMOUNT: \$ 400.00
Due upon Receipt

ATTN: _____

☎ 479-856-2456

Client: Kimberly Lee

Service Location: 708 Patterwood
BRYANT AR

Date of Service: 1-15-22

I. Services provided:

- A. INSTALLED NEW FILL VALVES & FLAPPERS ON BOTH TOILETS TO STOP CONSTANT RUN.
- B. STOP CONSTANT RUN.
- C. INSTALLED NEW STEM & WASHERS IN MASTER SHOWER TO STOP CONSTANT DRIP

TOTAL COST: \$ 400.00

DUE DATE:

PLEASE MAKE PAYMENT TO:

RightAway Plumbing
7 Cottonwood Ct
Little Rock Ar 72211

TECHNICIAN:

IP 8782

MP 6557

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 1-13-2022 Service Account No.: 003693-000
 Customer Name: Billy Hearn Home Phone: 240-6189
 Service Address: 2316 Rain tree pr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-13-22

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

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.

FOR OFFICE USE ONLY										
<u>2 months</u>		Amount of Bill:	<u>*697.63</u>			Usage:	<u>411</u>			
		Average Bill:	<u>*66.65</u>			Three Month Average Usage:	<u>40</u>			
		Adjustment Approved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Approved By:					
		Amount of Adjustment to Sewer Bill:	<u>*328.02</u>			Adjusted Bill Amount:	<u>*369.61</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.				

Angele Shepard
 Customer Service Manager



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Leak Fixed 2316 Raintree Dr

1 message

Billy Heavner <billyheavner1@gmail.com>

Thu, Jan 13, 2022 at 2:38 PM

To: waterbilling@cityofbryant.com

Hi, I was told that I could send in my invoices for fixing a water leak and the water department would help with my high bills. I had one plumber come out and fix a leak last week and it was \$375 but they haven't sent me an invoice yet (I've messaged them and asked for it again today). I did write a check to them so there's that proof if I need to get that to you.


But there was another leak apparently and I had another plumber come out today to fix and that was \$646 (receipt attached). So I'm at over \$1,000 now on those repairs.

My water bill last month was about \$191 and this month is about \$505!

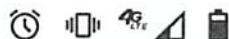
Please see what you can do to help me out. This has cost me a lot of money already.

Thank you.

William Heavner
2316 Raintree Dr.
Bryant, AR 72022
(501) 240-6189

 **Plumber receipt.pdf**
16K

12:24 54°



Matlock Rooter Services LLC

6100 Getty Dr Suite W, North

Little Rock, AR 72117

LIC # MP4883

matlockrooterservices@yahoo.co

m

Billy Heavner

2316 Raintree Dr

Bryant, AR 72022

Service Date(s): 01/05/22

Upon arrival, found a plastic compression coupling under the ground that had been crushed. Replaced this leaking section with two shark bite couplings and a new section of pipe. Covered this area with a meter box to keep it from being crushed again.

Should you have any questions, feel free to contact our office.



Payment receipt

You paid \$646.19

to NEWTON SERVICES INC on January 13, 2022

Invoice no.	020997
Invoice amount	\$646.19
Total	\$646.19

Payment method	VISA****5300
Authorization ID	MU0056408250

Thank you

NEWTON SERVICES INC

501 2497700

www.nsiplumbing.com | stevenewton71@outlook.com

1218 Meadows Dr, Benton, AR

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-13-22 Service Account No.: 005196-000
 Customer Name: Yoshalan Rome Home Phone: 733-4615
 Service Address: 902 Ruthi Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-11-22

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

Water 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.

FOR OFFICE USE ONLY									
<u>2 months</u>	Amount of Bill:	<u>\$511.17</u>			Usage:	<u>300</u>			
	Average Bill:	<u>\$90</u>			Three Month Average Usage:	<u>52</u>			
Adjustment Approved:		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
Amount of Adjustment to Sewer Bill:		<u>\$194.23</u>			Adjusted Bill Amount:				
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Christy Shepard
Customer Service Manager

Kenneth
501-733-4615

Ac# 005196-000

00040072

From	RES	DATE	1-11-22			
NAME	Kevin Taylor					
ADDRESS	902 Ruth Dr Bryant					
CITY STATE, ZIP	AR, 72022					
SOLD BY	CASH	CHECK	CREDIT CARD	ON ACCT	MOUSE RETURN	PAID OUT
QUAN.	DESCRIPTION				PRICE	AMOUNT
	Repaired the water service line in the yard please adjust Mr. Taylor's bill because the water was not going into waste water					
	Total				\$	400 ⁰⁰
RECEIVED BY	Kenneth Jan					

KEEP THIS RECEIPT FOR REFERENCE

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-12-22 Service Account No.: 016738-000
 Customer Name: Teresa Whitwell Home Phone: _____
 Service Address: 301 Monticello Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 10/17/21

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

Leak at bottom of meter loop

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.

FOR OFFICE USE ONLY									
<u>3 months</u>	Amount of Bill:	<u>\$1,060.61</u>			Usage:	<u>625</u>			
	Average Bill:	<u>\$80⁰⁰</u>			Three Month Average Usage:	<u>43</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>\$491.53</u>			Adjusted Bill Amount:	<u>\$569.08</u>			
	Payment Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt.		

[Signature]
Customer Service Manager

MIDDLETON

SERVICE INVOICE

WHITWELL, BRUCE
301 MONTICELLO WEST
BRYANT, AR 72022

INVOICE NUMBER: 0705395-IN
INVOICE DATE: 10/22/21
CUSTOMER NO.: 0110535
CUSTOMER P.O.:
TERMS: DUE UPON RECEIPT
JOB DATE: 10/22/21
JOB LOCATION:

WHITWELL, BRUCE
301 MONTICELLO WEST
BRYANT, AR 72022

We are grateful for the opportunity to serve you and all your HVAC needs.

ITEM NO.	UNIT	ORDERED	PRICE	AMOUNT
--- SVC JOB 0705395 ---				
LEAK				
Found leak at bottom of meter loop and at shark bites that were used to install the regulator. Bypass				
4440-016	EVERBILT 1/4 HP 2 IN UTILITY P	1.00	0.0000	0.00
4440-016	3/4 MALE ADPT	5.00	0.0000	0.00
4440-016	3/4 NL CTSXFP CPLG	1.00	0.0000	0.00
4440-016	1X3/4 NL SIGHT CPLG	1.00	0.0000	0.00
4440-016	3/8 UNION PRES RED VLV	1.00	0.0000	0.00
4440-016	WATER METER CPLG 3/4X1X2 1/2	1.00	0.0000	0.00
701	PLUMBING DIAGNOSTIC	1.00	79.9500	79.95
707	LABOR	2.00	120.0000	240.00
708	LABOR	1.00	178.0800	178.08
Leak repair				

PAID IN FULL 12-15-21 (V)

If you have questions, please call or text 501-847-0371. You can also email us at service@middletone.com or use our live chat at middletone.com to schedule your maintenance.

NET INVOICE: 498.03
SALES TAX: 49.18
INVOICE TOTAL: 547.21

VOTED BEST OF THE BEST IN CENTRAL ARKANSAS FOR 23 CONSECUTIVE YEARS.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-19-22 Service Account No.: 026595-000
 Customer Name: Suzy Barnett Home Phone: 870-489-5322
 Service Address: 3214 Meadowlake Work Phone: _____
 City: Bryant State, Zip: AR 72072
 Date Leak Detected: _____ Date Repaired: 10/21

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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- 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.

FOR OFFICE USE ONLY									
<u>3 months</u>		Amount of Bill:		<u>\$524.84</u>		Usage:		<u>306</u>	
		Average Bill:		<u>\$48</u>		Three Month Average Usage:		<u>26</u>	
Adjustment Approved:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>		Approved By:			
Amount of Adjustment to Sewer Bill:		<u>\$225.94</u>		Adjusted Bill Amount:		<u>\$298.90</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. <input type="checkbox"/>	

Cindy Stipan
 Customer Service Manager



How doers
get more done.

17060 INTERSTATE 30
BENTON, AR 72015 (501)860-6288

1405 00062 15362 10/31/21 04:01 PM
SALE SELF CHECKOUT

6972761082080 TANK TO BOWL <A> 9.87
TANK TO BOWL KIT FOR MANSFIELD
039961014771 400ARHRKP10 <A> 19.98
PERFORMAX COMPLETE TOILET REPAIR KIT

SUBTOTAL 29.85
SALES TAX 2.80
TOTAL \$32.65

XXXXXXXXXXXX1385 DEBIT USD\$ 32.65

AUTH CODE 001388
Chip Read Verified By PIN
AID A0000000980840 DEBIT

1405 10/31/21 04:01 PM



1405 62 15362 10/31/2021 6804

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 1 90 01/29/2022

XX
DID WE NAIL IT?

Take a short survey for a chance TO WIN
A \$5,000 HOME DEPOT GIFT CARD

Opine en español

www.homedepot.com/survey

User ID: H88 32418 31075
PASSWORD: 21531 31013

Entries must be completed within 14 days
of purchase. Entrants must be 18 or
older to enter. See complete rules on
website. No purchase necessary.

Suzy Barnett Lloyd 3214 Meadowlake Dr. PH: 870-489-5322

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-11-22 Service Account No.: 029517-000
 Customer Name: Nicolas Chinchurreta Home Phone: 747-9437
 Service Address: 614 SE 2nd St. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-7-22

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.

FOR OFFICE USE ONLY										
<u>2 months</u>	Amount of Bill:	<u>\$1,136.11</u>			Usage:	<u>652</u>				
	Average Bill:	<u>\$95</u>			Three Month Average Usage:	<u>57</u>				
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:					
	Amount of Adjustment to Sewer Bill:	<u>\$533.15</u>			Adjusted Bill Amount:	<u>\$602.96</u>				
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.	<input type="checkbox"/>

[Signature]
Customer Service Manager



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

- SALE -

SALES#: S2471FYV 4159691 TRANS#: 10593544 01-07-22

851291 4-PACK 123A SPECIALTY BAT	22.98
738309 FM FCT CUR/FRZ CAP	5.56
2 @ 2.78	
579153 KORRY ULTRA FLAPPER	13.96
2 @ 6.98	
456833 PTFE TAPE 1/2-IN X 43-FT	2.14

SUBTOTAL:	44.64
TAX:	4.41
INVOICE 10422 TOTAL:	49.05
N/C:	49.05

M/C: XXXXXXXXXXXX0402 AMOUNT:49.05 AUTHCD: 988652
 CHIP REFID:247110068680 01/07/22 16:12:14
 APL: MASTERCARD TR: 8000008000
 AID: A000000041010 TSI: 6800
 STORE: 2471 TERMINAL: 10 01/07/22 16:12:24
OF ITEMS PURCHASED: 6
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'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

STORE MANAGER: JANIE PAGE

LOWE'S PRICE PROMISE
 FOR MORE DETAILS, VISIT LOWES.COM/PRICEPROMISE

 * 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 *
 * Y O U R I D #104229 247120 070737 *
 * *
 * 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: 10 01/07/22 16:12:24

Acct#
029517-000

1-11-22

Nicolas Chinchureta
SOL-747-9437

Had to change out
the tank seals
on 2 toilets to
fix a leak after
adding dye tablets
in tank

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-10-22 Service Account No.: 018220-000
 Customer Name: Miy'Esha Bonds Home Phone: 580-4018
 Service Address: 2124 Jon Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-10-22

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

Toilet Leak (fill valve)

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

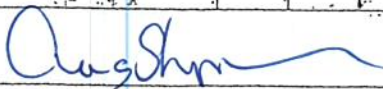
Sworn Statement:

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.

FOR OFFICE USE ONLY									
<u>3 months</u>	Amount of Bill:	<u>\$951.54</u>			Usage:	<u>560</u>			
	Average Bill:	<u>\$158.00</u>			Three Month Average Usage:	<u>92</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>\$281.44</u>			Adjusted Bill Amount:	<u>\$670.10</u>			
	Payment Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt:		



Customer Service Manager



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Fwd: Invoice due from Clog Hogs LLC/ MiyEsha Akins

1 message

Team Star <miyeshabonds@gmail.com>
To: waterbilling@cityofbryant.com
Cc: Team Star <miyeshabonds@gmail.com>

Mon, Jan 10, 2022 at 8:20 AM

5015804018

Ac# 018220-000

Sent from my iPhone

Begin forwarded message:

From: Clog Hogs LLC <notifications@housecallpro.com>
Date: January 10, 2022 at 8:14:01 AM CST
To: miyeshabonds@gmail.com
Subject: Invoice due from Clog Hogs LLC
Reply-To: cloghogs@yahoo.com

CLOG HOGS



Your Invoice from Clog Hogs LLC

Hi Miyesha Akins,

Attached please find Invoice #198-1 for your service on December 3, 2021.

Thank you.

Invoice Number: 198-1
Service Date: Dec 03, 2021
Invoice Date: Jan 10, 2022
Customer Name: Miyesha Akins FAHW

Service Address: 2124 Jon Drive Bryant, AR 72022

Services

Drain Cleaning Flat Rate \$90.00

Mainline stoppage, ran cable through outside cleanout to unclog. Pulled back roots on cable

FAHW Labor Prices - Plumbing Labor 1 Hour \$55.00

Replaced leaking fill valve on downstairs toilet.

Materials

Fill valve \$24.50

Fluidmaster fill vavle

Subtotal \$169.50

Bryant \$2.42

Amount Due **\$171.92**

PAY ONLINE

(501) 650-2316 | cloghogs@yahoo.com

<http://www.cloghogs.com>

4300 Division St, C
North Little Rock, AR 72118

[Terms & Conditions](#)

Powered by
 Housecall Pro

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-4-22 Service Account No.: 021592-000
 Customer Name: Nakita Brown Home Phone: 952-1375
 Service Address: 111 SW 3rd St. #D Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 12/21/22

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

Toilet Flapper

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

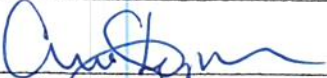
Sworn Statement:

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.

FOR OFFICE USE ONLY									
<u>2 months</u>		Amount of Bill: <u>\$810.20</u>			Usage: <u>478</u>				
		Average Bill: <u>\$37.20</u>			Three Month Average Usage: <u>12</u>				
Adjustment Approved:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Approved By:				
Amount of Adjustment to Sewer Bill:		<u>\$449.91</u>			Adjusted Bill Amount: <u>\$360.29</u>				
Payment Plan	<input type="checkbox"/> Yes	<input type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt.			


Customer Service Manager

021592-000

toilet

REPAIR & MAINTENANCE NOTICE

Address	Resident Names	Phone Numbers
111 S.W. 3rd St. #D	Nakita Brown	N: 501-952-1375

DATE REPORTED: 12/21/2021

A MAINTENANCE PERSON ENTERED THIS PROPERTY TO PERFORM THE REPAIR AND MAINTENANCE ITEMS LISTED BELOW.

ITEM	REPAIR INFORMATION
Toilet continuously running. ✓	- found bad 3" Flapper
Need to check meter & look for a possible leak, water bill is a lot higher than normal & showing 12,000 gallons of water used in a month. ✓	- Replaced w/ New & Rechecked meter. (No longer spinning)

MAINTENANCE TECH: [Signature]

DATE WORK COMPLETED: 12-21-21

COVID - 19 INFORMATION	Verified by office person (initial)	Date office person verified	Verified by maintenance tech before enter unit	Date maint. tech verified (initial)
Is anyone in the household presently sick?	JW	12/21/21		
Is anyone in the household presently showing symptoms of COVID-19?	JW	12/21/21		
Is anyone in the household presently self-quarantining due to a suspected exposure to COVID-19?	JW	12/21/21		

JW
Prepared By
Office Staff

JW JC 12/21/21
Signed Out By Maint. Tech Date Signed
Office Staff Signed Out To Out

JW 12/30/21
Closed Out By Date Closed Out
Office Staff

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-6-22 Service Account No.: 004608-000
 Customer Name: Karen Bragg Home Phone: 425-9129/940-2842
 Service Address: 2300 Greenleaf Dr. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-5-22

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

Toilet Leak

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.

FOR OFFICE USE ONLY							
3 months	Amount of Bill:	\$518.12			Usage:	302	
	Average Bill:	\$55			Three Month Average Usage:	33	
	Adjustment Approved:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	Approved By: _____			
	Amount of Adjustment to Sewer Bill:	\$201.15			Adjusted Bill Amount:	\$316.97	
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.	

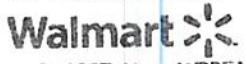
Customer Service Manager

Acct# 004608-000

Jerry + Karen BRAGG
2300 Greenleaf DR
BRYANT, AR 72022
501 425-9129 / 501 940-2862

Replace all INTERNALS in three toilets.

Give us feedback @ survey.walmart.com
Thank you! ID #:7RD8B113Z7TV



501-847-2857 Mgr: ANDREA
400 BRYANT AVE
BRYANT AR 72022

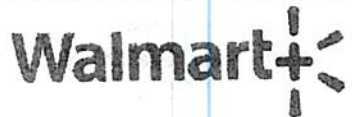
ST# 03230	OP# 009031	TE# 31	TR# 00972
PLUMBING	004905710292		19.97 X
PLUMBING	004905710292		19.97 X
PLUMBING	004905710292		19.97 X
	SUBTOTAL		59.91
TAX 1	9.875 %		5.92
	TOTAL		65.83
	DEBIT TEND		65.83
	CHANGE DUE		0.00

EFT DEBIT PAY FROM PRIMARY
65.83 TOTAL PURCHASE

Debit **** * 2607 1 0
REF # 200500043749
NETWORK ID. 0056 APPR CODE 002011
Debit
AID A0000000042203
AAC B430C9C1E84F4A1A
TERMINAL # SC010543

01/05/22 13:21:55
ITEMS SOLD 3

IC# 9646 9231 3373 9770 5769



Give them the gift
of membership
Scan to gift today.

Low Prices You Can Trust. Every Day.
01/05/22 13:22:00

79-78.28
97-96.12
27-26.75

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-14-22 Service Account No.: 001610-000
 Customer Name: Deana Wawak Home Phone: 765-5841
 Service Address: 503 Center Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-13-22

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

Leak underneath house

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

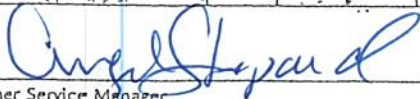
Sworn Statement:

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.

FOR OFFICE USE ONLY							
3 months	Amount of Bill:	907.88			Usage:	534	
	Average Bill:				Three Month Average Usage:	49	
	Adjustment Approved:	Yes	No	Approved By:			
	Amount of Adjustment to Sewer Bill:	383.50			Adjusted Bill Amount:	524.38	
Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment Amt.	


 Customer Service Manager

This receipt is for fixing
the water leak at 503
Center Street 72022.

I lost the first receipt
and had to get another.
My memo and phone is:

Rock Sanders
501-~~765~~765-5841

Underneath house

48-47.56
52-51.53
287-284.41



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

- SALE -

SALES#: FSTLANE3 13 TRANS#: 6123825 01-13-22

818131	1/2-IN SHARKBITE SLIP COU	27.96
	2 @	13.98
24707	1/2-IN X 12-IN COPPER REPR	19.92
	2 @	9.91

	JOB TOTAL:	52.50
	TAX:	4.72
INVOICE 06861	TOTAL:	52.50
	M/C:	52.50

M/C: XXXXXXXXXXXX4584 AMOUNT:52.50 AUTHCD: 016275
CHIP REFID:247106030685 01/13/22 19:29:56
APL: CAPITAL ONE TVR: 000008000
AID: A0000000041010 TSI: E800
STORE: 2471 TERMINAL: 06 01/13/22 19:30:25
OF ITEMS PURCHASED: 4
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



THANK YOU FOR SHOPPING LOWE'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

STORE MANAGER: JAMIE PAGE

LOWE'S PRICE PROMISE
FOR MORE DETAILS, VISIT LOWES.COM/PRICEPROMISE

* 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 #068613 247170 131729 *
* * * * *

* 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 *

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-11-22 Service Account No.: 017587-000
 Customer Name: Madaline Meatte Home Phone: _____
 Service Address: 2419 Ramond Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 12/20/21

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

Regulator & Valve Leaking (Sewer only)

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

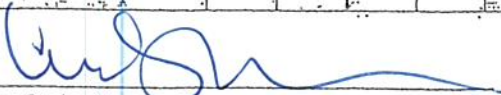
Sworn Statement:

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.

FOR OFFICE USE ONLY							
<u>3 months</u>	Amount of Bill:	<u>\$420.48</u>			Usage:	<u>419</u>	
	Average Bill:	<u>\$60</u>			Three Month Average Usage:	<u>60</u>	
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:		
	Amount of Adjustment to Sewer Bill:	<u>\$236.84</u>			Adjusted Bill Amount:	<u>\$183.64</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

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 1-12-22 Service Account No.: 012355-000
 Customer Name: Ty Mathis Home Phone: 507-4364
 Service Address: 3902 Millbrook Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-11-22

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

Several pipes of water line rusted out and leaking.

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

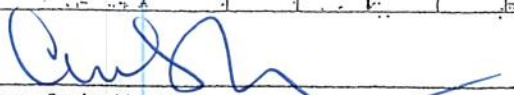
Sworn Statement:

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.

FOR OFFICE USE ONLY							
<u>3 months</u>	Amount of Bill:	<u>\$453.99</u>			Usage:	<u>264</u>	
	Average Bill:	<u>\$54</u>			Three Month Average Usage:	<u>33</u>	
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:		
	Amount of Adjustment to Sewer Bill:	<u>\$163.50</u>			Adjusted Bill Amount:	<u>\$290.49</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



ALLIED SUPPLY INC.

PIPE - VALVES - FITTINGS - INDUSTRIAL SUPPLIES
 6300 MURRAY STREET
 P.O. BOX 1366
 LITTLE ROCK, ARKANSAS 72203
 PHONE: (501) 562-6180 FAX: (501) 562-8874
 www.allied-supply-inc.net | info@alliedsupplyinc.net

INVOICE

*3902
M. Milwaukee*



Page 1/1

<p>Sold To</p> <p>CASH <i>Ty Mathis</i> <i>501-507-4304</i> <i>Ty Mathis</i> <i>performed</i> <i>All the repairs</i></p>	<p>Ship To</p> <p>CASH <i>Several pieces of water line rusted out & had to be replaced to stop water leak</i></p>
--	---

Customer # 0001037	Order Date 01/11/2022	Sales Order # 093234	Buyer	Customer P/O #	Ship Via Will Call -	Salesman 001
Invoice # P012648	Invoice Date 01/11/2022	Ship Date	Freight Terms PREPAID	Job Number	Terms Cash on Delivery	

LN	QNTY ORD	QNTY SHIP	QNTY B/O	QNTY PICK	PRODUCT DESCRIPTION	UOM	NET PRICE	EXTENSION
1	1	1			09509 3/4" WATER PRESSURE REG 70XL	EA	105.3125	\$105.31
2	1	1			11033 3/4" MILWAUKEE BALL VA THD UPBA-100	EA	20.4469	\$20.45
3	2	2			01434 3/4" BRASS LF UNION	EA	13.4976	\$27.00
4	2	2			01490 3/4"x2 1/2" BRASS NIPPLE	EA	3.0044	\$6.01
5	1	1			01491 3/4"x3" BRASS NIPPLE	EA	3.466	\$3.47
8	1	1			05676 3/4x1429 BM TEFLON TAPE	EA	5.0924	\$5.09
<p>.....Payment Received..... Visa 181.76</p>								

Signature Proof of Delivery:

Ty Mathis

01/11/22 13:30

Blank signature area

Merchandise	167.33
Freight	0.00
Misc Charges	0.00
Sub Total	167.33
Taxable	167.33
Tax (178)	14.43
TOTAL	\$181.76