

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: April 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

| | | | | |
|-------------------|-------------------------------------|--|----------------------------|------------------|
| <u>Water Only</u> | Customer Name | Teresa McAllister | Customer Address | 2508 N. Prickett |
| | Date Leak Detected by AMI | | Date Customer Notified | |
| | Date Leak Started | | Date Leak Repaired | 2/2022 |
| <u>1 month</u> | Amount of Bill: | \$369.26 | Usage: | 504 |
| | Average Bill: | \$19.34 | Three Month Average Usage: | 20 |
| | Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| | Amount of Adjustment to Sewer Bill: | \$159.23 | Adjusted Bill Amount: | \$210.03 |
| | Customer Name | John Garrett | Customer Address | 2903 Pikewood |
| | Date Leak Detected by AMI | | Date Customer Notified | |
| | Date Leak Started | | Date Leak Repaired | |
| <u>3 months</u> | Amount of Bill: | \$956.63 | Usage: | 545 |
| | Average Bill: | \$122.73 | Three Month Average Usage: | 71 |
| | Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| | Amount of Adjustment to Sewer Bill: | \$345.28 | Adjusted Bill Amount: | \$611.35 |
| | Customer Name | Sarah Davis | Customer Address | 276 Flintstone |
| | Date Leak Detected by AMI | | Date Customer Notified | |
| | Date Leak Started | | Date Leak Repaired | 1-20-22 |
| <u>2 months</u> | Amount of Bill: | \$2,839.53 | Usage: | 1686 |
| | Average Bill: | \$118.00 | Three Month Average Usage: | 65 |
| | Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| | Amount of Adjustment to Sewer Bill: | \$1,514.99 | Adjusted Bill Amount: | \$1,324.54 |
| | Customer Name | Andrew Wheat | Customer Address | 1113 Hunterlee |
| | Date Leak Detected by AMI | | Date Customer Notified | |
| | Date Leak Started | | Date Leak Repaired | 2-23-22 |
| <u>3 months</u> | Amount of Bill: | \$620.61 | Usage: | 351 |
| | Average Bill: | \$38.88 | Three Month Average Usage: | 21 |
| | Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| | Amount of Adjustment to Sewer Bill: | \$299.52 | Adjusted Bill Amount: | \$321.09 |
| | Customer Name | Samantha Stewart | Customer Address | 2813 Olivia Ct |
| | Date Leak Detected by AMI | | Date Customer Notified | |
| | Date Leak Started | | Date Leak Repaired | 2/22 |
| <u>1 month</u> | Amount of Bill: | \$675.28 | Usage: | 381 |
| | Average Bill: | \$105.00 | Three Month Average Usage: | 60 |
| | Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| | Amount of Adjustment to Sewer Bill: | \$333.84 | Adjusted Bill Amount: | \$341.44 |

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SUMMARY

Date: April 2022

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| Highest Bill Adjusted | Lowest Bill Adjusted |
| Total Gallons Adjusted | Total Cost of Adjustments |

DETAILS

| | | | | | | | |
|-------------------------------------|-----------------|------------------|--------------------------|----------------------------|--------------|-------------------|--|
| Customer Name | | Felisha McCaster | | Customer Address | | 2509 Birdie Ln | |
| Date Leak Detected by AMI | | | | Date Customer Notified | | | |
| Date Leak Started | | | | Date Leak Repaired | | 3-9-22 | |
| 2 months | Amount of Bill: | *814.62 | | Usage: | | 458 | |
| Average Bill: | | *38.84 | | Three Month Average Usage: | | 20 | |
| Adjustment Approved: | | Yes | <input type="checkbox"/> | No | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | *434.72 | | Adjusted Bill Amount: | | *379.90 | |
| Customer Name | | Jennifer Jones | | Customer Address | | 111 SE 3rd St. | |
| Date Leak Detected by AMI | | | | Date Customer Notified | | | |
| Date Leak Started | | | | Date Leak Repaired | | 1-29-22 | |
| 1 month | Amount of Bill: | *285.66 | | Usage: | | 160 | |
| Average Bill: | | *37.20 | | Three Month Average Usage: | | 20 | |
| Adjustment Approved: | | Yes | <input type="checkbox"/> | No | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | *145.60 | | Adjusted Bill Amount: | | *140.06 | |
| Customer Name | | Tony Pierce | | Customer Address | | 3322 Commonwealth | |
| Date Leak Detected by AMI | | | | Date Customer Notified | | | |
| Date Leak Started | | | | Date Leak Repaired | | 2-28-22 | |
| 3 months | Amount of Bill: | *703.73 | | Usage: | | 407 | |
| Average Bill: | | *90.00 | | Three Month Average Usage: | | 58 | |
| Adjustment Approved: | | Yes | <input type="checkbox"/> | No | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | *242.32 | | Adjusted Bill Amount: | | *461.41 | |
| Customer Name | | Ashleigh Hart | | Customer Address | | 101 S. Maple #A | |
| Date Leak Detected by AMI | | | | Date Customer Notified | | | |
| Date Leak Started | | | | Date Leak Repaired | | 3-1-22 | |
| 2 months | Amount of Bill: | *940.76 | | Usage: | | 540 | |
| Average Bill: | | *38.84 | | Three Month Average Usage: | | 20 | |
| Adjustment Approved: | | Yes | <input type="checkbox"/> | No | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | *520.00 | | Adjusted Bill Amount: | | *420.76 | |
| Customer Name | | Jennifer Jones | | Customer Address | | 111 SE 3rd St. | |
| Date Leak Detected by AMI | | | | Date Customer Notified | | | |
| Date Leak Started | | | | Date Leak Repaired | | 1-29-22 | |
| 1 month | Amount of Bill: | *285.66 | | Usage: | | 160 | |
| Average Bill: | | *38.84 | | Three Month Average Usage: | | 20 | |
| Adjustment Approved: | | Yes | <input type="checkbox"/> | No | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | *145.60 | | Adjusted Bill Amount: | | *140.06 | |

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| Total Gallons Adjusted | Total Cost of Adjustments |

DETAILS

| | | | |
|-------------------------------------|--|----------------------------|---------------------|
| Customer Name | Priscilla Batista | Customer Address | 3903 S. Shobe Rd |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 1-12-22 |
| <u>3 months</u> Amount of Bill: | \$560.60 | Usage: | 322 |
| Average Bill: | \$101.00 | Three Month Average Usage: | 58 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$153.92 | Adjusted Bill Amount: | \$406.68 |
| Customer Name | Adam Dodd | Customer Address | 701 Medinah Blvd |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 3-1-22 |
| <u>2 months</u> Amount of Bill: | \$3,277.49 | Usage: | 1855 |
| Average Bill: | \$84.00 | Three Month Average Usage: | 47 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$1,831.44 | Adjusted Bill Amount: | \$1,446.05 |
| Customer Name | Cindy Fleming | Customer Address | 801 SW 4th St. |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 2-28-22 |
| <u>1 month</u> Amount of Bill: | \$223.95 | Usage: | 125 |
| Average Bill: | \$38.84 | Three Month Average Usage: | 20 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$109.20 | Adjusted Bill Amount: | \$114.75 |
| Customer Name | Laurie Harper | Customer Address | 407 SE 1st #B |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 3-1-22 |
| <u>1 month</u> Amount of Bill: | \$331.50 | Usage: | 186 |
| Average Bill: | \$38.84 | Three Month Average Usage: | 20 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$172.64 | Adjusted Bill Amount: | \$158.86 |
| Customer Name | Arthur Hall | Customer Address | 1800 N. Reynolds #1 |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 12/2021 |
| <u>1 month</u> Amount of Bill: | \$350.89 | Usage: | 197 |
| Average Bill: | \$38.84 | Three Month Average Usage: | 20 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$184.08 | Adjusted Bill Amount: | \$166.81 |

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DETAILS

| | | | |
|-------------------------------------|--|----------------------------|-------------------|
| Customer Name | Karen Burgess | Customer Address | 3511 Independence |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 2-25-22 |
| <u>3 months</u> Amount of Bill: | \$1,287.82 | Usage: | 750 |
| Average Bill: | \$132.00 | Three Month Average Usage: | 75 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$546.00 | Adjusted Bill Amount: | \$741.82 |
| Customer Name | Sharon Steele | Customer Address | 42 Neal Cove |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 2-11-22 |
| <u>2 months</u> Amount of Bill: | \$645.37 | Usage: | 362 |
| Average Bill: | \$46.00 | Three Month Average Usage: | 26 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$322.40 | Adjusted Bill Amount: | \$322.97 |
| Customer Name | Gri. P. in Tankersley | Customer Address | 1142 Oak Glenn Ln |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 2-21-22 |
| <u>3 months</u> Amount of Bill: | \$2,536.57 | Usage: | 1,453 |
| Average Bill: | \$62.00 | Three Month Average Usage: | 35 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$1,401.92 | Adjusted Bill Amount: | \$1,134.65 |
| Customer Name | Tawana Williams | Customer Address | 3503 Longmeadow |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 3-1-22 |
| <u>2 months</u> Amount of Bill: | \$495.50 | Usage: | 277 |
| Average Bill: | \$85.00 | Three Month Average Usage: | 51 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$182.00 | Adjusted Bill Amount: | \$313.50 |
| Customer Name | Myra Eatmon | Customer Address | 4102 Stonebrook |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 4-21 |
| <u>3 months</u> Amount of Bill: | \$991.43 | Usage: | 605 |
| Average Bill: | \$126.00 | Three Month Average Usage: | 74 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$379.55 | Adjusted Bill Amount: | \$611.88 |

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DETAILS

| | | | | | |
|-------------------------------------|-----------------|--------------------------|----|----------------------------|---------------------|
| Customer Name | Tim Hall | | | Customer Address | 2107 Mills Park |
| Date Leak Detected by AMI | | | | Date Customer Notified | |
| Date Leak Started | | | | Date Leak Repaired | 3-11-22 |
| <u>3 months</u> Amount of Bill: | \$708.33 | | | Usage: | 401 |
| Average Bill: | \$110.00 | | | Three Month Average Usage: | 60 |
| Adjustment Approved: | Yes | <input type="checkbox"/> | No | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$229.84 | | | Adjusted Bill Amount: | \$478.49 |
| Customer Name | Mandy Miller | | | Customer Address | 1188 Oak & Hennepin |
| Date Leak Detected by AMI | | | | Date Customer Notified | |
| Date Leak Started | | | | Date Leak Repaired | 2-11-22 |
| <u>2 months</u> Amount of Bill: | \$566.02 | | | Usage: | 317 |
| Average Bill: | \$107.00 | | | Three Month Average Usage: | 59 |
| Adjustment Approved: | Yes | <input type="checkbox"/> | No | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$206.96 | | | Adjusted Bill Amount: | \$359.06 |
| <u>Water Only</u> Customer Name | Stephen Nutsell | | | Customer Address | 708 Woody Dr. |
| Date Leak Detected by AMI | | | | Date Customer Notified | |
| Date Leak Started | | | | Date Leak Repaired | 3-19-22 |
| <u>1 month</u> Amount of Bill: | \$557.96 | | | Usage: | 765 |
| Average Bill: | \$19.34 | | | Three Month Average Usage: | 20 |
| Adjustment Approved: | Yes | <input type="checkbox"/> | No | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$245.10 | | | Adjusted Bill Amount: | \$312.86 |
| Customer Name | Serenity Vapes | | | Customer Address | 3116 Horizon #1 |
| Date Leak Detected by AMI | | | | Date Customer Notified | |
| Date Leak Started | | | | Date Leak Repaired | 2-22-22 |
| <u>1 month</u> Amount of Bill: | \$323.92 | | | Usage: | 180 |
| Average Bill: | \$41.84 | | | Three Month Average Usage: | 6 |
| Adjustment Approved: | Yes | <input type="checkbox"/> | No | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$166.40 | | | Adjusted Bill Amount: | \$157.52 |
| Customer Name | Ashley Fair | | | Customer Address | 3301 Forest Pr. |
| Date Leak Detected by AMI | | | | Date Customer Notified | |
| Date Leak Started | | | | Date Leak Repaired | 2-28-22 |
| <u>2 months</u> Amount of Bill: | \$396.79 | | | Usage: | 221 |
| Average Bill: | \$64.13 | | | Three Month Average Usage: | 34 |
| Adjustment Approved: | Yes | <input type="checkbox"/> | No | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$159.12 | | | Adjusted Bill Amount: | \$237.67 |

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

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|--|--------------------------------------|
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| Highest Bill Adjusted | Lowest Bill Adjusted |
| Total Gallons Adjusted | Total Cost of Adjustments |

DETAILS

| | | | |
|-------------------------------------|--|----------------------------|------------------------------|
| Customer Name | Kinal Patel (Super 8) | Customer Address | 201 Dell Dr. |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 1-26-22 |
| <u>2 months</u> Amount of Bill: | \$2,383.24 | Usage: | 1272 |
| Average Bill: | \$948. ⁰⁰ | Three Month Average Usage: | 525 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$230.88 | Adjusted Bill Amount: | \$2,152.36 |
| Customer Name | Kaylee Lawrence | Customer Address | 309 SE 3 rd St #1 |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 1-23-22 |
| <u>1 month</u> Amount of Bill: | \$345.60 | Usage: | 194 |
| Average Bill: | \$38.84 | Three Month Average Usage: | 20 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$180.96 | Adjusted Bill Amount: | \$164.64 |
| Customer Name | Destiny Hobbs | Customer Address | 1205 Medinah Blvd |
| Date Leak Detected by AMI | | Date Customer Notified | |
| Date Leak Started | | Date Leak Repaired | 3/24/22 |
| <u>2 months</u> Amount of Bill: | \$344.57 | Usage: | 303 |
| Average Bill: | \$49.60 | Three Month Average Usage: | 38 |
| Adjustment Approved: | Yes <input type="checkbox"/> No <input type="checkbox"/> | Approved By: | |
| Amount of Adjustment to Sewer Bill: | \$236.08 | Adjusted Bill Amount: | \$108.49 |
| 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: 2-25-22 Service Account No.: 030519-000
 Customer Name: Teresa McAllister Home Phone: _____
 Service Address: 2508 N. Pickle Hill Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2/22

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

Toilet Leak + faucet leak

 (Water Only) 50/50?

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

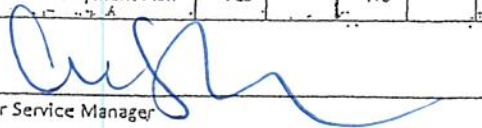
Sworn Statement:

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 | | | | | | | | | |
|---------------------|-------------------------------------|--------------------------|-------------------------------------|--------------------------|----------------------------|--------------|--------------------------|----------|--------------|
| 1 month | Amount of Bill: | \$ 369.26 | | | Usage: | 504 | | | |
| | Average Bill: | \$ 19.34 | | | Three Month Average Usage: | 20 | | | |
| | Adjustment Approved: | Yes | <input checked="" type="checkbox"/> | No | <input type="checkbox"/> | Approved By: | | | |
| | Amount of Adjustment to Sewer Bill: | \$ 159.23 | | | Adjusted Bill Amount: | \$ 210.03 | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

Customer Service Manager 

Water Only



Angela Shepard <ashepard@cityofbryant.com>

[waterbilling] Main line break

1 message

Acct 030519-000

teresa mcallister <mcallisterteresa67@gmail.com>
To: waterbilling@cityofbryant.com

Fri, Feb 25, 2022 at 1:35 PM

I had a main line break the end of January 2022 that my landlord was not able to repair until the first week of February. I called the water dept. And they came out right away to verify it was in fact a water line and graciously turned it off for me until my landlord could send someone out to fix it later that week. Thank you so much for the quick response time and assistance! I attached a copy of my landlords bill for your records. My sewer line has been blocked for the last two weeks as well, and only one bathroom in the house. Today I will finally have it repaired! I don't know if it applies to the previous break or not. If anything, with no toilet, the bill should be the same or lower. That I'm thankful for! I do appreciate you all and your courteous service while undergoing this mess.

Teresa McAllister
2508 N Prickett Rd
Bryant, AR 72022
501-303-9678



6969.jpeg
102K

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-19-22 Service Account No.: 003549-000
 Customer Name: Stephen Nutsell Home Phone: _____
 Service Address: 708 Woody Dr. Work Phone: _____
 City: Alexander State, Zip: AR 72002
 Date Leak Detected: _____ Date Repaired: 3-19-22

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

3/4 Connector on Service Line from Pressure Regulator Leaking.

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

"Water Only" 50/50?

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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|---------------------|-------------------------------------|---|-----------------------------|--------------------------|----------------------------|---------------|--------------------------|
| <u>1 month</u> | Amount of Bill: | <u>557.96</u> | | | Usage: | <u>765</u> | |
| | Average Bill: | <u>19.34</u> | | | Three Month Average Usage: | <u>20</u> | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | |
| | Amount of Adjustment to Sewer Bill: | <u>245.10</u> | | | Adjusted Bill Amount: | <u>312.86</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: | | |

[Signature]
Customer Service Manager

027170

Statement DATE 2/22/22 PERIOD

TO MR. Drew

IN ACCOUNT WITH 5 to 10 plumbing

| | | | |
|--|---------------------|---------------------|-----------------------------------|
| Fixed fireplace At Drew's house | 75 | 00 | |
| Checked for leak at The Plaza suite 2 | 75 | 00 | |
| Replaced faucet in Suite 1B | 225 | 00 | |
| Checked water meter at The Plaza | 75 | 00 | |
| Repaired leak at 2508 W Prickett/checked toilet | 325 | 00 | |
| CURRENT | OVER 30 DAYS | OVER 60 DAYS | TOTAL AMOUNT 775 00 |

© 2012

01-11

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-1-22 Service Account No.: 017199-001
 Customer Name: John Garrett Home Phone: 860-9903
 Service Address: 2903 Pike Wood Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: _____

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

Leak (2nd) Landlord said he was not repairing this leak. John said they are moving at end of month. They would like for these bills to be adjusted.

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

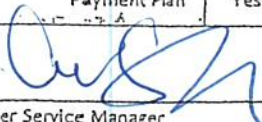
Sworn Statement:

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

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|---------------------|--|--|--|---|--|---|----------------------------|--------------|----------|--|
| 3 months | | Amount of Bill: | | \$956.63 | | | Usage: | | 545 | |
| | | Average Bill: | | 122.73 | | | Three Month Average Usage: | | 71 | |
| | | Adjustment Approved: | | Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> | | | Approved By: | | | |
| | | Amount of Adjustment to Sewer Bill: | | \$345.28 | | | Adjusted Bill Amount: | | \$611.35 | |
| 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: 2-23-22 Service Account No.: 025371-001
 Customer Name: Sarah Davis Home Phone: _____
 Service Address: 276 Flintstone Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-20-22

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

Flex Pipe 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>\$2,839.53</u> | | | Usage: | <u>1686</u> | | | |
| | Average Bill: | <u>\$118.00</u> | | | Three Month Average Usage: | <u>65</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$1,514.99</u> | | | Adjusted Bill Amount: | <u>\$1,324.54</u> | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

[Signature]
Customer Service Manager

AC# 025371-001

501-650-9804 Eddie
501-813-4574 Sarah

63797

| | | | |
|------------------------------------|-----------------------------|----------------------|----------------------|
| Statement | | DATE | TERMS |
| | | 1-20-22 | NET |
| TO | | | |
| Kniston Holder | | | |
| 276 FLINTSTONE DRIVE | | | |
| BRYANT AR 72022 | | | |
| IN ACCOUNT WITH | | | |
| SHARP CONST. & ELECTRICAL SERVICES | | | |
| 721 HWY 365, MAYFLOWER, AR 72106 | | | |
| 501-618-0272 | | | |
| | SERVICE CALL | \$150. ⁰⁰ | |
| | PARTS (FITTINGS + PEX PIPE) | 28. ⁰⁰ | |
| | (REPAIRED 2 LEAKS) | \$178. ⁰⁰ | |
| Pd. In Full | | | |
| CURRENT | OVER 30 DAYS | OVER 60 DAYS | TOTAL AMOUNT |
| | | | \$178. ⁰⁰ |

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-23-22 Service Account No.: 027015-000
 Customer Name: Andrew Wheat Home Phone: _____
 Service Address: 1113 Hunter Lee Dr. Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 2-23-22

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

Leak at 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.

| FOR OFFICE USE ONLY | | | | | | | | | |
|-------------------------------------|-----------------|---|-----------------------------|--------------------------|----------------------------|---------------|--------------------------|----------|--------------|
| <u>3 months</u> | Amount of Bill: | <u>620.61</u> | | | Usage: | <u>351</u> | | | |
| | Average Bill: | <u>38.88</u> | | | Three Month Average Usage: | <u>21</u> | | | |
| Adjustment Approved: | | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Approved By: | | | | | |
| Amount of Adjustment to Sewer Bill: | | <u>299.52</u> | | | Adjusted Bill Amount: | <u>321.09</u> | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

Andy Shepard
Customer Service Manager

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-17-22 Service Account No.: 019450-000
 Customer Name: Samantha Stewart Home Phone: 813-0347
 Service Address: 2813 Olivia Ct Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 2-22

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

Left water hose on for 4 days accidentally

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>1 month</u> | Amount of Bill: | <u>\$675.28</u> | Usage: | <u>381</u> | | | | | |
| | Average Bill: | <u>\$105.00</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>\$333.84</u> | Adjusted Bill Amount: | | | | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Amt. | 3 Months | 6 Months | | |

[Signature]
Customer Service Manager

AC# 019450-000

TO: WATER COMMITTEE

FROM: Samantha & Kreg Stewart

ADDRESS: 2813 Oliva Ct Bryant, AR 72022

We received an extremely high water bill for the month of March 2022. We discovered that the outside water hose was accidentally left running for approx. 4 days. Please consider ~~we~~ helping us adjust for this issue. We greatly appreciate it.

- Samantha Stewart

501 813 0347

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-9-22 Service Account No.: 030149-000
 Customer Name: Felisha McCaster Home Phone: 314-341-2263
 Service Address: 2509 Birdie Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-9-22

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 | | | | | | | | | |
|-------------------------------------|-----------------|---|-----------------------------|--------------------------|----------------|-----------------|--------------------------|----------|--------------|
| <u>2 months</u> | Amount of Bill: | <u>\$814.62</u> | Usage: | <u>458</u> | | | | | |
| | Average Bill: | <u>\$38.84</u> | Three Month Average Usage: | <u>20</u> | | | | | |
| Adjustment Approved: | | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | Approved By: | | | | | |
| Amount of Adjustment to Sewer Bill: | | | <u>\$434.72</u> | Adjusted Bill Amount: | | <u>\$379.90</u> | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

Alyssa Shepard
Customer Service Manager

Fairways at Hurricane Creek, ALP
P O Box 13000
Fayetteville, AR 72703

Work Order No. 1499314
Date Call: 03/09/2022 11:06 AM

*Acct#
030149-000*

Status Work Completed

Date Completed: 03/09/2022 12:25 PM
Brief Desc: Maintenance stopped by last Friday,

Job Site: 0148/2509
2509 Birdle Lane
Bryant, AR 72022

Caller Name: Felisha McCaster

Caller Phone: (314) 341-2263x
Occupant: McCaster (t0194980)

Priority: 3-General
Ok to enter? YES
Category: Plumbing

Home (314) 341-2263x

SubCategory: Toilet

Problem Description: Maintenance stopped by last Friday, I think, and stated that they couldn't find any issues that will attribute to my \$823 water bill. However, I've been listening a lot more closely and the toilet in the guest bathroom runs even when it hasn't been flushed. Not sure that this is the only problem but I'm requesting a follow up.
Also, he asked me to request a day by day report...when I called the water company to inquire about that amount, she gave me days of mid Dec. - Jan. Are you guys able to communicate with them now that it's been determined that's something is wrong?
Respectfully,
Felisha McCaster
Apt 2509

Parts & Labor

| Quantity/ Hours | Item Type/ Employee Name | Description | Unit Price | Total |
|--------------------|-----------------------------|-------------|--------------|------------|
| .42 | Jones | Jones | .00 | .00 |
| | | | Total | .00 |

Authorized by: _____
Signed by _____
Dated _____
Invoice No. _____

Full Description Maintenance stopped by last Friday, I think, and stated that they couldn't find any issues that will attribute to my \$823 water bill. However, I've been listening a lot more closely and the toilet in the guest bathroom runs even when it hasn't been flushed. Not sure that this is the only problem but I'm requesting a follow up.
Also, he asked me to request a day by day report...when I called the water company to inquire about that amount, she gave me days of mid Dec. - Jan. Are you guys able to communicate with them now that it's been determined that's something is wrong?
Respectfully,
Felisha McCaster
Apt 2509

Technician Notes: [mijones 3/9/22 12:25 PM]
replaced flapper

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-28-22 Service Account No.: 022488-000
 Customer Name: Jennifer Jones Home Phone: _____
 Service Address: 111 SE 3rd St. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1/29/22

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

PVC Pipe Came Loose

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>1 month</u> | Amount of Bill: | <u>\$285.66</u> | | | | Usage: | <u>160</u> | | | |
| | Average Bill: | <u>\$37.20</u> | | | | Three Month Average Usage: | <u>20</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$145.60</u> | | | | Adjusted Bill Amount: | <u>\$140.06</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



Office White <office@pauldwhitepa.com>

Account 022488-000 - statement

1 message

Office White <office@pauldwhitepa.com>
To: waterbilling@cityofbryant.com

Mon, Feb 28, 2022 at 1:30 PM

Dear City of Bryant Water Department,

On January 29th, we had a cold snap. I woke up that morning with no water pressure. I looked underneath my house and saw that a pvc pipe fitting had come loose. I turned off the water at my meter. I reglued and reconnected the pipe, but by that time I believe the water had been running all night. The side yard was completely flooded. I turned the water back on and did not detect any more leaking.

I visited the water department today to see what could be done regarding the \$285.66 water bill. I was told to send in the statement above for submission to the April 1st committee meeting. I would appreciate any relief that you could offer to me, since the amount of money involved is beyond my budget.

Please let me know if you have any questions. I appreciate your consideration. And I would appreciate it if you let me know that you have received this email.

Sincerely,
Jennifer Jones
111 SE 3rd Street

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The Law Office of Paul D. White, P.A.
301 Roya Lane, Suite 4; Bryant, AR 72022
P.O. Box 710; Bryant, AR 72089-0710
(501) 847-5556
(501) 847-6444 fax
(866) 908-5556 toll-free

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2/28/22 Service Account No.: 003299-000
 Customer Name: Tony Pierce Home Phone: 681-9777
 Service Address: 3322 Commonwealth Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2/28/22

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

Water Meter Leak & Pressure Regulator 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>\$703.73</u> | | | Usage: | <u>407</u> | | | |
| | Average Bill: | <u>\$90</u> | | | Three Month Average Usage: | <u>58</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$242.32</u> | | | Adjusted Bill Amount: | <u>\$461.41</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. | | |

[Signature]
Customer Service Manager

INVOICE

003299-000
Tony Pierce
501-681-9777



Platinum Plumbing LLC
16984 S. Alexander Rd
Alexander, AR 72002

Arplatinumplumbing@gmail.com
+1 5014138335

Tony Pierce

Bill to
Tony Pierce

Invoice details
Invoice no. : 5
Invoice date : 02/28/2022
Terms : Net 30
Due date : 03/30/2022

Product or service

Amount

| | |
|---|----------|
| 1. Repair | \$417.50 |
| Repair leak at water meter and replace pressure regulator | |

| | |
|--------------------|-----------------|
| Total | \$417.50 |
| Payment | -\$417.50 |
| Balance due | \$0.00 |

Ways to pay



Note to customer

Thank you for your business.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3/1/22 Service Account No.: 030875-000
 Customer Name: Ashleigh Hart Address Home Phone: _____
 Service Address: 101 S. Maple St #A Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/1/22

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>\$940.76</u> | | | Usage: | <u>540</u> | | | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$520.⁰⁰</u> | | | Adjusted Bill Amount: | <u>\$420.76</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. | | |

Amy Stegall
Customer Service Manager

Acct# 030875-000

INVOICE



Alisa Marcarelli
101B S Maple
Bryant
(818) 857-2517

Shane Trusty Construction and Remodeling

PO Box 938
Bryant, AR 72089
Phone: (501) 517-5865
Email: shanetrustyconstruction@yahoo.com

Payment Terms Due upon receipt
Invoice # 000637
Date 03/01/2022

| Description | Quantity | Rate | Total |
|-----------------------|----------|----------|-----------------|
| Replaced toilet parts | 1.0 | \$150.00 | \$150.00 |
| Subtotal | | | \$150.00 |
| Total | | | \$150.00 |

***Estimates are good for 30 days from receipt.

Flooring and Tile Supplier:
ProSource of Little Rock
10400 Maumelle Blvd, North Little Rock, AR 72113
(501) 490-9284
Pamela Johnson
Just call and make an appointment and she will walk you through the process.

Tile Only:
Tile Shop
105 N Rodney Parham Rd,
Little Rock, AR 72205
(501) 707-8244
Aaron Springer
Just call and make an appointment and he will walk you through the process.

Countertop Supplier:
Affordable Granite and More, Inc.
1212 S Bowman Rd, Little Rock, AR 72211
(501) 353-7508
Erin Crowe or Any Representative
Just call and make an appointment and she or one of her specialist will walk you through the process.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 2-28-22 Service Account No.: 022488-000
 Customer Name: Jennifer Jones Home Phone: _____
 Service Address: 111 SE 3rd St Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-29-22

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

PVC Pipe 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>1 month</u> | Amount of Bill: | <u>\$285.66</u> | | | Usage: | <u>160</u> | | | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$145.60</u> | | | Adjusted Bill Amount: | <u>\$140.06</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. | | |

[Signature]
 Customer Service Manager



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Account 022488-000 - statement

1 message

Office White <office@pauldwhitepa.com>
To: waterbilling@cityofbryant.com

Mon, Feb 28, 2022 at 1:30 PM

Dear City of Bryant Water Department,

On January 29th, we had a cold snap. I woke up that morning with no water pressure. I looked underneath my house and saw that a pvc pipe fitting had come loose. I turned off the water at my meter. I reglued and reconnected the pipe, but by that time I believe the water had been running all night. The side yard was completely flooded. I turned the water back on and did not detect any more leaking.

I visited the water department today to see what could be done regarding the \$285.66 water bill. I was told to send in the statement above for submission to the April 1st committee meeting. I would appreciate any relief that you could offer to me, since the amount of money involved is beyond my budget.

Please let me know if you have any questions. I appreciate your consideration. And I would appreciate it if you let me know that you have received this email.

Sincerely,
Jennifer Jones
111 SE 3rd Street

--
The Law Office of Paul D. White, P.A.
301 Roya Lane, Suite 4; Bryant, AR 72022
P.O. Box 710; Bryant, AR 72089-0710
(501) 847-5556
(501) 847-6444 fax
(866) 908-5556 toll-free

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-28-22 Service Account No.: 004174-000
 Customer Name: Priscilla Batista Home Phone: _____
 Service Address: 3903 S. Shobe Rd. Work Phone: _____
 City: Bryant State, Zip: AR 72072
 Date Leak Detected: _____ Date Repaired: 1-12-22

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 | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|--------------------------|----------------------------|-----------------|--------------------------|----------|--------------|
| <u>3 months</u> | Amount of Bill: | <u>\$560.60</u> | | | Usage: | <u>322</u> | | | |
| | Average Bill: | <u>\$101.00</u> | | | Three Month Average Usage: | <u>58</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$153.92</u> | | | Adjusted Bill Amount: | <u>\$406.68</u> | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

[Signature]
Customer Service Manager



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Asking for adjustment to water bill

1 message

Acct 004174-006

Priscilla Batista <priscilla.batista.realtor@gmail.com>
To: waterbilling@cityofbryant.com

Mon, Feb 28, 2022 at 11:41 AM

Good morning, I spoke with you about a month ago about the large water bills we had for a few months. You informed me that you could consider an adjustment since my husband had discovered and fixed the running toilet in our second bathroom. I'm sending the receipt and hope you can help me out. Thank you so much. I appreciate your help. Priscilla Batista

3903 S Shobe Rd.

SHLES#: 82471LM1 2012677 TRANS#: 9028767 01-12-22

751661 3/8-IN X 9-IN SS-TL (1038) 10.96

2 @ 5.48

102362 ROUND FLOODLIGHT KIT BRZ 15.68

1030995 KORKY FILL VALVE AND FLAP 31.96

2 @ 15.98

738309 FM FCT CUR/FRZ CAP 5.56

2 @ 2.78

621145 GE LFL 32W T8A 4FT 4.1K 2 9.98

3757104 DURAFLEAME IR CABINET ESPR 119.00

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-1-22 Service Account No.: 016557-001
 Customer Name: Adam Dodd Home Phone: _____
 Service Address: 701 Medinah Blvd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-1-22

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 | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|--|--|
| <u>2 months</u> | Amount of Bill: | <u>\$3,277.49</u> | | | Usage: | <u>1855</u> | | | |
| | Average Bill: | <u>\$84</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>\$1,831.44</u> | | | Adjusted Bill Amount: | <u>\$1,446.05</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. | | |

Chris Spaul
Customer Service Manager

Leak Adjust -

Lakes at Hurricane Creek, a Limited Partnership
P O Box 13000
Fayetteville,AR 72703

Work Order No. 1479033
Date Call: 03/01/2022 09:05 AM

Acct 016557-001

Status Work Completed

Date Completed: 03/01/2022 09:53 AM
Brief Desc: Water bill came out to 1000 dollars

Job Site: 0178/0701-MB
701 Medinah Blvd. >
Bryant,AR 72022

Caller Name: Adam Dodd

Caller Phone: (501) 909-3932x ✓
Occupant: Dodd (t0061436)
Office: (501) 909-3932x

Priority: 3-General
Ok to enter? YES
Category: Plumbing
Animal in Apt? No

SubCategory: Toilet

Problem Description: Water bill came out to 1000 dollars this month. Water company said it could be a potential leak. Per their report 300 gallons are running per hour.

Parts & Labor

| Quantity/ Hours | Item Type/ Employee Name | Description | Unit Price | Total |
|--------------------|-----------------------------|-------------|--------------|------------|
| .00 | Lowe | Lowe | .00 | .00 |
| | | | Total | .00 |

Authorized by: _____
Signed by _____
Dated _____
Invoice No. _____

Full Description Water bill came out to 1000 dollars this month. Water company said it could be a potential leak. Per their report 300 gallons are running per hour.

Technician Notes: Replaced toilet flapper and adjusted water level

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 2-28-22 Service Account No.: 000180-000
 Customer Name: Cindy Fleming Home Phone: _____
 Service Address: 801 SW 4th St. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-28-22

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 | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|--|--|
| <u>1 month</u> | Amount of Bill: | <u>\$223.95</u> | | | Usage: | <u>125</u> | | | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$109.20</u> | | | Adjusted Bill Amount: | <u>\$114.75</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. | | |

Cynthia [Signature]
 Customer Service Manager

501-413-9453

000180-000

INVOICE

Platinum Plumbing LLC
16984 S. Alexander Rd
Alexander, AR 72002

Arplatinumplumbing@gmail.com
+1 5014138335



Cindy Fleming

Bill to
Cindy Fleming

Invoice details
Invoice no. : 6
Invoice date : 02/28/2022
Terms : Net 30
Due date : 03/30/2022

| Product or service | Amount |
|---|----------------|
| 1. Repair Repair small leak at toilet in house- 801 SW 4th Street | \$95.00 |
| Total | \$95.00 |

Ways to pay



Note to customer

Thank you for your business.

[Pay invoice](#)

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-1-22 Service Account No.: 009437-001
 Customer Name: Laurie Harper Home Phone: _____
 Service Address: 407 SE 1st # B Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-1-22

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 | | | | | | | |
|-------------------------------------|-----------------|---|-----------------------------|--------------------------|----------------------------|--------------|--------------------------|
| <u>1 month</u> | Amount of Bill: | <u>\$331.50</u> | | | Usage: | <u>186</u> | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | |
| Adjustment Approved: | | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | |
| Amount of Adjustment to Sewer Bill: | | <u>\$172.64</u> | | | Adjusted Bill Amount: | | |
| | | | | | <u>\$158.86</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. | |

[Signature]
Customer Service Manager



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

LAURIE HARPER
 407 SE FIRST ST
 BRYANT, AR 72022

LAURIE HARPER
 407 SE FIRST ST UNIT B
 BRYANT, AR 72022

Invoice

03/01/22
 Page 1

*Acct 009437-001
 501-762-5378*

| Call Slip Number | Invoice Date | Invoice Number | Due Date |
|------------------|--------------|----------------|------------|
| 102578 | 03/01/2022 | S242391 | 03/11/2022 |

| Tech | Date |
|--------|------------|
| TOMMY | 03/01/2022 |
| TRAVIS | 03/01/2022 |

| Qty | Description | Unit Price | Amount |
|-----|---------------------------------|------------|--------|
| (1) | PULL AND RESET TOILET OR URINAL | 219.07 | 219.07 |

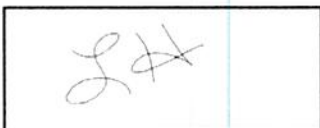
ADDITIONAL DETAILS:

Pulled and reset toilet that was leaking at base. Flange was high and toilet needed to be shimmed. after repair toilet was tested and no leaks were detected.

No warranty on any existing plumbing.

No to water company.
 Made minor adjustment on toilet that was running continuously. Please adjust Bill due to this issue.

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.



Authorized Signature

03/01/2022 10:22AM

CC #1028 Auth:153114 \$219.07

Total Due: 219.07
Received: 219.07

Balance Due: 0.00

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-25-22 Service Account No.: 030639-000
 Customer Name: Arthur Hall Home Phone: _____
 Service Address: 1800 N. Reynolds St Work Phone: _____
 City: Bryant State, Zip: AR 72072
 Date Leak Detected: _____ Date Repaired: 12/21

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

Leak on cold water supply

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>1 month</u> | Amount of Bill: | <u>\$350.89</u> | | | Usage: | <u>197</u> | | | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$184.08</u> | | | Adjusted Bill Amount: | <u>\$166.81</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: | | |

Arthur Hall
Customer Service Manager

Acct# 830639-000

S & K Quality Plumbing, Inc.

210 Cornerstone Road
Alexander, AR 72002
501-455-8100

Invoice

| Date | Invoice # |
|------------|-----------|
| 12/20/2021 | S123964 |

| |
|--|
| Bill To |
| Art Hall 10500 W. Markham, Suite 107 Little Rock, AR 72205 |

PAID
12/20/2021

| P.O. No. | Terms | Project |
|----------|-------|-----------------------|
| | | 1800 N Reynolds- S... |

| Quantity | Description | Rate | Amount |
|----------|--|--------|--------|
| | Set sink in counter top / Repaired leak on cold water supply / unable to set sink due to drain pipe needs to be lower (drain off bathroom lavatory) / wants to wait to cut bathroom wall | | |
| 1.5 | Plumber Labor 12/17/21 - 1.5 Hours | 92.50 | 138.75 |
| | Subtotal | | 138.75 |
| | Credit Card Convenience Fee | 4.00% | 5.55 |
| | Sales Tax in Bryant | 9.875% | 0.00 |

Thank you for your business!!! **Total** \$144.30

Any invoice(s) not paid within 30 days of billing date will be subject to a 10% monthly charge or a flat \$15.00 monthly charge until past due balance is paid in full.
S&K Quality Plumbing reserves the right to any and all means of collections available under law to collect this debt and customer will be liable for any legal fees incurred to collect this debt.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-25-22 Service Account No.: 006677-000
 Customer Name: Karen Burgess Home Phone: _____
 Service Address: 3511 Independence Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-25-22

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 | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|--|--|
| <u>3 months</u> | Amount of Bill: | <u>\$1,287.82</u> | | | Usage: | <u>150</u> | | | |
| | Average Bill: | <u>\$132</u> | | | Three Month Average Usage: | <u>15</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | | Approved By: | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$546.00</u> | | | Adjusted Bill Amount: | <u>\$741.82</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. | | |

[Signature]
Customer Service Manager

DRAIN RIGHT PLUMBING LLC
 P.O. BOX 2008 • BENTON, AR 72018-2008
 501-317-1730 501-249-9497
 MP 6760
 drainright6760@gmail.com

SERVICE INVOICE

Acct 6066M-000

| | | | | | |
|-----------------------|-------------------------|--------------|-----------|--------|-----------------------------------|
| Customer's Order No. | | Phone | Mechanic | Helper | Date of Order |
| | | 501-351-0239 | Jarrod | Kyle | 2-25-22 |
| Bill To | Walter Burgess | | | | Date |
| Address | 3511 Independence Drive | | | | Order Taken By |
| City | Bryant, Ar. 72022 | | | | <input type="checkbox"/> Day Work |
| Job Name and Location | | | | | <input type="checkbox"/> Contract |
| | | | | | <input type="checkbox"/> Extra |
| Work Ordered By | | | Job Phone | | |

DESCRIPTION OF WORK

- replaced 1/2 turn angle stop on toilet of upstairs bathroom + flushing on toilet

- replaced mansfield flushing in Master Bathroom

- replaced flush ring^{in toilet} + cup springs on shower in hall way guest bathroom downstairs

Walter Burgess 501-351-0239
 waterbilling@cityofBryant.com

April -

| | | |
|--------------------------------------|-----------------|-----------------------------|
| | TOTAL MATERIALS | 57.13 |
| | TOTAL LABOR | 185.00 |
| | TAX | |
| <input type="checkbox"/> No One Home | Date Completed | TOTAL AMOUNTS 242.13 |

Signature _____
 I hereby acknowledge the satisfactory completion of the above described work.

- Total amount due for above work: or
- Total billing to be mailed after completion of work

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-11-22 Service Account No.: 023184-000
 Customer Name: Sharon Steele Home Phone: _____
 Service Address: 42 Neal Cove Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-11-22

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

Small pin hole leak in 3/4 PVC 90.

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>\$645.37</u> | | | Usage: | <u>362</u> | | | |
| | Average Bill: | <u>\$46</u> | | | Three Month Average Usage: | <u>26</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$322.40</u> | | | Adjusted Bill Amount: | <u>\$322.97</u> | | | |
| Payment Plan | Yes | <input type="checkbox"/> | No | <input type="checkbox"/> | Payment Period | 3 Months | <input type="checkbox"/> | 6 Months | Payment Amt. |

[Signature]
Customer Service Manager



Lajena Holt <lholt@cityofbryant.com>

[waterbilling] Fw: Plumbing work completed at 42 Neal cove

1 message

'Sharon Steele' via Water Billing <waterbilling@cityofbryant.com>
Reply-To: Sharon Steele <steele.sharon@ymail.com>
To: "waterbilling@cityofbryant.com" <waterbilling@cityofbryant.com>

Fri, Mar 11, 2022 at 2:06 PM

please confirm receipt

----- Forwarded Message -----

From: Wisam Zako <wmzako@gmail.com>
To: Sharon Steele <steele.sharon@ymail.com>
Sent: Friday, March 11, 2022, 10:40:51 AM CST
Subject: Plumbing work completed at 42 Neal cove

Job address 42 Neal Cove
Scope leak by water meter on customer side
Small pin hole leak in 3/4" PVC 90. Cut out and replaced section of water line. Tested and covered hole.

Job Completed Feb 11th 2022
Paid in full total amount 575.00

City of Bryant
210 SW Third St
Bryant, AR 72022
501-943-0999
8:00am - 4:30pm Monday - Friday

Account Information

Account: 023184-000
Name: Sharon Steele
Service Address: 42 Neal Cv.
Service Period: 1/26/2022 to 2/25/2022 (31 days)
Billing Date: 3/10/2022
Due Date: 4/1/2022

Meter Reading

Table with 7 columns: Serial, Date, Previous Reading, Current Reading, Date, Reading, Cons. Row 1: 13950877, 1/25/2022, 3664.00000, 3925.00000, 2/25/2022, 3925.00000, 261.00000

Current Charges

FSDWA: FSDWA \$0.40
Misc Fees: CAW Watershed 5/8" \$0.90
Sewer: Sewer \$19.50
Sewer: Sewer Consumption \$250.64
Stormwater: Stormwater Residential \$3.00
Taxes: Sales Tax - Water \$17.01
Water: \$0.00
Water: W-5/8" Meter \$13.69
Water: W-5/8" Meter Consumption \$158.58
Total Current Charges: \$463.72

Bill Summary

| | |
|--|-----------------|
| Previous Balance: | \$181.65 |
| Payments Received: | \$181.65 |
| Adjustments: | \$0.00 |
| Current Charges: | \$463.72 |
| * Total Amount Due by: 4/1/2022 | \$463.72 |

* This was the amount due at the time of billing.

To view your amount due at the current time and make a payment [click here.](#)

Auto payment is setup for this customer account, do not pay.



March 2022 Newsletter_022822_FA_PRINT.pdf
3297K

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 2-22-22 Service Account No.: 018932-000
 Customer Name: Griffin Tankersley Home Phone: _____
 Service Address: 1142 Oak Glenn Ln. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-21-22

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.

| FOR OFFICE USE ONLY | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|
| <u>3 months</u> | Amount of Bill: | <u>\$2,536.57</u> | | | Usage: | <u>1453</u> | |
| | Average Bill: | <u>\$62.02</u> | | | Three Month Average Usage: | <u>35</u> | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$1,401.92</u> | | | Adjusted Bill Amount: | <u>\$1,134.65</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. |

Craig [Signature]
Customer Service Manager

American Leak Detection

Fax : (501)225-9673
 37 Collins Industrial Place
 North Little Rock, AR 72113

| | |
|--------------|-----------|
| Invoice Date | Invoice # |
| 2/21/2022 | 47518 |

PAID
02/21/2022

| |
|---|
| Billing Address |
| Richard Tankersley 1204 Oak Glenn Lp Bryant, AR 72022 |

| | |
|--|----------------------|
| Site Address | Griffen L Tankersley |
| 1142 Oak Glenn Loop 1142 Oak Glenn Loop Bryant, AR 72022 | |

| Claim #/P.O. # | Due Date | Completion | Rep | Phone # |
|----------------|----------|------------|-------|--------------|
| | PAID | 2/21/2022 | Nails | 501-366-4209 |

| | | | |
|------------------------------|---|--|-----------------|
| Leak Det. Res. | Leak detection services performed to reveal a leak on the houses service line near the meter. Leak was exposed and repairs were then made to 3/4" Viega pipe. System retested upon completion of repairs to reveal no more current leaks. ALD is not responsible for any landscaping. | | 350.00 |
| Plumbing labor 1 | Plumbing labor to make repairs. Leak detection and location work is guaranteed for (30) days from the date of completion. ALD will re-test the system or refund the detection fee (at our sole option), if it is reported within the (30) day period that a leak is not where marked. ALD will not be liable for consequential losses. Detection and Guarantee is limited to the first leak found in the system. | | 200.00 0.00 |
| Landscaping | ALD is not responsible for any landscaping upon completion of repairs. | | 0.00 |
| | Sales Tax | | 0.00 |
| Thank you for your business. | | | \$550.00 |

- (1) - Leak detection and location work is guaranteed for (30) days from the date of completion. We Will re-test the system or refund the detection (at our sole option), if it is reported within the (30) day period that a leak still exists. We will not be liable for consequential losses. Detection and Guarantee is limited to the first leak found in the line. Guarantee does not apply to additional leaks found in the same line.
- (2) - Leak detection on a vinyl liner is guaranteed for (48) hours from the time of completion. We will re-test the system or refund the detection fee (at our sole option), if it is reported within (48) hours that a leak still exists. We will not be liable for consequential losses.
- (3) - Minor repairs are guaranteed for (30) days from the date of completion for defective workmanship only.
- (4) - Major repairs are guaranteed for (12) months from the date of completion and for defective workman ship only.
- (5) - No Guarantee Applies.

| | |
|-------------------------|---------|
| Payments/Credits | -550.00 |
| Balance Due | \$0.00 |

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-1-22 Service Account No.: 020168-000
 Customer Name: Tawana Williams Home Phone: _____
 Service Address: 3503 Longview Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/1/22

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

Water Service Line

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

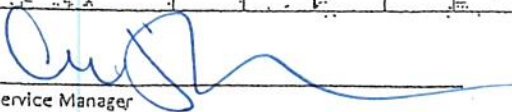
Sworn Statement:

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.

| FOR OFFICE USE ONLY | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|--|--|
| <u>2 months</u> | Amount of Bill: | <u>\$495.50</u> | | | Usage: | <u>277</u> | | | |
| | Average Bill: | <u>\$85</u> | | | Three Month Average Usage: | <u>51</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$182.00</u> | | | Adjusted Bill Amount: | <u>\$313.50</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

501-414-7034
 Acct# 030168-00
 559399

| CUSTOMER'S ORDER NO. | | DEPARTMENT | | DATE | | |
|-------------------------------------|----------------------|------------|--------|----------|-----------|----------|
| NAME <u>TAWANA Williams</u> | | | | | | |
| ADDRESS <u>3503 Long Meadow Dr</u> | | | | | | |
| CITY, STATE, ZIP <u>Brent 72022</u> | | | | | | |
| SOLD BY | CASH | C.O.D. | CHARGE | ON ACCT. | MDSE RETD | PAID OUT |
| | | | | | | |
| QUANTITY | DESCRIPTION | PRICE | AMOUNT | | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| 11 | <u>Repair</u> | | | | | |
| 12 | <u>Water Service</u> | | | | | |
| 13 | | | | | | |
| 14 | | | | | | |
| 15 | | | | | | |
| 16 | | | | | | |
| 17 | <u>John C...</u> | | | | | |
| 18 | | | | | | |
| 19 | | | | | | |
| 20 | | | | | | |
| RECEIVED BY | | | | | | |

1,500.00

KEEP THIS SLIP FOR REFERENCE

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 3-16-22 Service Account No.: 028624-000
 Customer Name: Mrya Eatmon Home Phone: _____
 Service Address: 4102 Stonybrook Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 4/21

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 | | | | | | | | | | |
|---------------------|-------------------------------------|---|----------------------------|--------------------------|----------------|----------|--------------------------|----------|--------------|--------------------------|
| <u>3 months</u> | Amount of Bill: | <u>5991.43</u> | Usage: | <u>605</u> | | | | | | |
| | Average Bill: | <u>5126.00</u> | Three Month Average Usage: | <u>74</u> | | | | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Approved By: | | | | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>379.55</u> | Adjusted Bill Amount: | <u>5611.88</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"/> |

Craig Spauld
 Customer Service Manager

March 16, 2022

RE: 4102 Stoneybrook Dr. Bryant

To whom it may concern:

This letter is regarding a leak in one of the restrooms at 4102 Stoneybrook Dr. Bryant, AR. The leak was discovered and repaired between the dates of 4/2021 and 6/2021. The toilet was replaced with new seals. If you have any additional questions, please reference the email below.

Thanks!

Innovative Realty, Property Management

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-15-22 Service Account No.: 000861-000
 Customer Name: Tim Hall Home Phone: _____
 Service Address: 2107 Mills Park Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-17-22

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.

| FOR OFFICE USE ONLY | | | | | | | | | |
|-------------------------------------|-----------------|---|-----------------------------|--------------------------|----------------------------|------------|--------------------------|----------|--------------|
| <u>3 months</u> | Amount of Bill: | <u>\$708.33</u> | | | Usage: | <u>401</u> | | | |
| | Average Bill: | <u>\$110.00</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>\$229.84</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. |

[Signature]
Customer Service Manager



**AMERICAN
LEAK
DETECTION**

THE ORIGINAL LEAK SPECIALISTS™

#37 Collins Industrial Place
North Little Rock, AR 72113
Phone: (501) 228-0676 / (800) 461-2962
Fax: (501) 225-9673

INVOICE

| | |
|--------------|-----------|
| INVOICE DATE | INVOICE # |
| 3/7/2022 | 47628 |

| | |
|--|--|
| BILLING ADDRESS | |
| Tim Hall 2107 Mills Park Rd Bryant, AR 72022 | |

| | |
|--|--|
| SITE ADDRESS | |
| Tim Hall 2107 Mills Park Rd Bryant, AR 72022 | |

| Claim # /P.O. # | Payment Terms | Completion Date | Tech | Billing Phone |
|---|--|-----------------|----------------|---------------|
| | Due on receipt | 3/4/2022 | Nails | 501-920-4248 |
| ITEM | DESCRIPTION | QTY | AMOUNT | |
| Leak Det. Res. | ALD performed a complete electronic leak detection of the potable water system to reveal a leak outside on the houses service line. Leak was exposed to reveal a leak on a 3/4" to 1" copper to PVC transition fitting. Failed fittings were removed and repairs were made to resolve the leak. System retested upon completion of repairs to reveal no more leaks. ALD is not responsible for any landscaping. | | 350.00 | |
| Plumbing labor 1 | Plumbing labor to make repairs. Leak detection and location work is guaranteed for (30) days from the date of completion. ALD will re-test the system or refund the detection fee (at our sole option), if it is reported within the (30) day period that a leak is not where marked. ALD will not be liable for consequential losses. Detection and Guarantee is limited to the first leak found in the system. | | 350.00 0.00 | |
| Please remit payment to above address. | | | Total | |

Guarantees Apply as Indicated # _____

#1 Leak detection and location work is guaranteed for 30 days from the date of completion. We will re-test the system or refund the detection fee (at our sole option), if it is reported within the above 30 day period that the leak is not where originally marked. We will not be liable for consequential losses. Detection and Guarantee is limited to the first leak found on the system.

#2 Pool leak detection guarantee applied to pool pipes and above ground plumbing only. No guarantee applies to leak detection on pool structure or structural repairs unless otherwise specified. We will re-test the pool pipes and above ground plumbing or refund the detection fee (at our sole option), if it is reported within the above 30 day period that the leak is not where originally marked. We will not be responsible for consequential losses. Guarantee does not apply to additional leaks found in the same line.

#3 Minor repairs are guaranteed for 30 days from the date of completion.

#4 Major repairs are guaranteed for 12 months from the date of completion. We will not be liable for consequential losses.

#5 No Guarantee Applies

I FIND THE WORK SATISFACTORY AND THE CHARGES AS AGREED, AND AGREE TO PAY THE TOTAL AMOUNT WITHOUT ANY DEDUCTION WHATSOEVER, I FURTHER AGREE TO PAY REASONABLE CHARGES FOR COLLECTION, INCLUDING LEGAL FEES, IN THE EVENT OF MY DEFAULT, AS WELL AS PENALTY AND INTEREST AS ALLOWED BY LAW.



AMERICAN LEAK DETECTION

THE ORIGINAL LEAK SPECIALISTS™

#37 Collins Industrial Place
North Little Rock, AR 72113
Phone: (501) 228-0676 / (800) 461-2962
Fax: (501) 225-9673

INVOICE

| | |
|--------------|-----------|
| INVOICE DATE | INVOICE # |
| 3/7/2022 | 47628 |

| | |
|--|--|
| BILLING ADDRESS | |
| Tim Hall 2107 Mills Park Rd Bryant, AR 72022 | |

| | |
|--|--|
| SITE ADDRESS | |
| Tim Hall 2107 Mills Park Rd Bryant, AR 72022 | |

| Claim # /P.O. # | Payment Terms | Completion Date | Tech | Billing Phone |
|-----------------|---|-----------------|--------------|-----------------|
| | Due on receipt | 3/4/2022 | Nails | 501-920-4248 |
| ITEM | DESCRIPTION | QTY | AMOUNT | |
| Landscaping | ALD is not responsible for any landscaping upon completion of repairs. Sales Tax | | | 0.00 |
| | | | | 0.00 |
| | | | Total | \$700.00 |

Please remit payment to above address

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-17-22 Service Account No.: 020438-000
 Customer Name: Mandy Miller Home Phone: _____
 Service Address: 1188 Oak Glen Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-11-22

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

HB Stem 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>\$566.02</u> | | | Usage: | <u>317</u> | | | |
| | Average Bill: | <u>\$101.00</u> | | | Three Month Average Usage: | <u>59</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | | | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$206.96</u> | | | Adjusted Bill Amount: | <u>\$359.06</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: | | | | |

Cingh
Customer Service Manager

JOB INVOICE

1363



TO: Mandy Miller
 ADDRESS: 1188 Oakglen Loop
 Bryant AR 72022
 ATTENTION:

DATE ORDERED: 2-11-22
 ORDER TAKEN BY:
 PHONE NO.: 773-4770
 CUSTOMER ORDER #:
 JOB LOCATION:
 JOB PHONE: STARTING DATE:
 TERMS:

| QTY. | MATERIAL | UNIT | AMOUNT | DESCRIPTION OF WORK |
|------|----------|-------|--------|---|
| 2 | HB Stems | 37.85 | 75.70 | Replaced HB Stems on front & rear of house. |
| | | TM | 75.70 | |

MISCELLANEOUS CHARGES

| LABOR | HRS. | RATE | AMOUNT |
|-------|------|------|--------|
| Bert | 2 | | 180.00 |
| Dev | 2 | | |

| | |
|---------------------|--------|
| TOTAL LABOR | 180.00 |
| TOTAL MATERIALS | 75.70 |
| TOTAL MISCELLANEOUS | |
| SUBTOTAL | 255.70 |
| TAX | |
| GRAND TOTAL | 255.70 |

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-18-22 Service Account No.: 016316-000
 Customer Name: Serenity Vapes Home Phone: 501-994-7704
 Service Address: 3116 Horizon Dr #1 Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-22-22

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 | | | | | | | | | |
|---------------------|-------------------------------------|---|-----------------------------|----------------|-----------------------------------|-----------------------------------|--------------|--|--|
| <u>1 month</u> | Amount of Bill: | <u>\$323.92</u> | | | Usage: | <u>180</u> | | | |
| | Average Bill: | <u>\$41.84</u> | | | Three Month Average Usage: | <u>6</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | | Approved By: | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$166.40</u> | | | Adjusted Bill Amount: | <u>\$157.52</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: | | |

Cecelia Shepard
Customer Service Manager

a Rue Plumbing, Inc
Po Box 1587
Benton, AR 72018
501-315-6300

501-794-7704
Amber

AC# 016316-000

David Russell
1700 Mountain View Rd
Benton, AR 72019-6415

David Russell
1700 Mountain View Rd
Benton, AR 72019-6415

Invoice # 15197

Invoice 2/22/2022
Date: Saturday

Bill-To: 100303
Location: 100303

| Service Description | Quantity | Price |
|---------------------|----------|-------|
|---------------------|----------|-------|

| | | |
|--|------|----------|
| Vape shop---Rooter sewer line and repair toilet--sat-- | 1.00 | \$331.00 |
|--|------|----------|

| | |
|-------------------|----------|
| SUBTOTAL | \$331.00 |
| TAX | \$0.00 |
| AMT PAID | \$0.00 |
| TOTAL | \$331.00 |
| AMOUNT DUE | \$331.00 |

Saturday---rooter sewer, repaired toilet , new fill valve, flapper and supply

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-18-22 Service Account No.: 024287-000
 Customer Name: Ashley Fair Home Phone: 501-519-1705
 Service Address: 3301 Forest Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 2-28-22

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

Toilet Leak & Hole in 1/2 Cold & Hot Water Pipe

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 | | | | | | | |
|---------------------|------------------------------|-------------------------------------|---|-----------------------------------|-----------------------------------|--------------|----------|
| 2 months | | Amount of Bill: | \$396.79 | | Usage: | 22.1 | |
| | | Average Bill: | \$64.00 | | Three Month Average Usage: | 34 | |
| | | Adjustment Approved: | Yes <input checked="" type="checkbox"/> | No <input type="checkbox"/> | Approved By: | | |
| | | Amount of Adjustment to Sewer Bill: | \$159.12 | | Adjusted Bill Amount: | | \$237.67 |
| 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

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-24-22 Service Account No.: 018350-000
 Customer Name: Kinal Patel (Super8) Home Phone: _____
 Service Address: 201 Bell Dr. Work Phone: _____
 City: Bryant State, Zip: AR. 72022
 Date Leak Detected: _____ Date Repaired: _____

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

Water Heater 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>\$2,383.24</u> | Usage: | <u>1272</u> | | | |
| | Average Bill: | <u>\$948.00</u> | Three Month Average Usage: | <u>525</u> | | | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No | Approved By: | | | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$230.88</u> | Adjusted Bill Amount: | <u>\$2152.36</u> | | | |
| Payment Plan | Yes | No | Payment Period | 3 Months | 6 Months | Payment Amt. | |

[Signature]
Customer Service Manager



Angela Shepard <ashepard@cityofbryant.com>

[waterbilling] Fw: You made a payment for an invoice! (#180738)

1 message

'kinal patel' via Water Billing <waterbilling@cityofbryant.com>
Reply-To: kinal patel <super8bryantar@yahoo.com>
To: "Waterbilling@cityofbryant.com" <Waterbilling@cityofbryant.com>

Thu, Mar 24, 2022 at 5:49 PM

Account Name: Shiv Maruti, Inc. DBA Super 8 Motel,
201 Dell Dr,
Bryant, AR
Account # 018350-000

WE have fixed the water leaked; attachment is the receipt of payment. Fixed by Arkansas Plumbing Solutions.
Requesting adjustment in billing.

Thank you,
Kenny Patel

----- Forwarded Message -----

From: Arkansas Plumbing Solutions P.O. Box 32 Bauxite AR 72011 <messenger@messaging.squareup.com>
To: "super8bryantar@yahoo.com" <super8bryantar@yahoo.com>
Sent: Wednesday, January 26, 2022, 01:21:35 PM CST
Subject: You made a payment for an invoice! (#180738)



Invoice Payment Made

\$1,751.44

Visa 2032 on January 26, 2022 at 1:21 PM

Invoice #180738
January 26, 2022

Customer
Kinal Patel
Super 8 Motel
super8bryantar@yahoo.com
501-847-7888
201 Dell Dr
Bryant , Arkansas 72022

| | |
|-------------------|-------------------------|
| Total Paid | Amount Remaining |
| \$3,131.21 | \$0.00 |

Message
We look forward to working with you.

Invoice summary

| | |
|---|-------------------|
| Install new 2" pressure reducing valve with isolation valve on building one | \$2,751.32 |
| (\$1,375.66 ea.) x 2 | |
| <i>Set water pressure to 75psi. No warranty to existing plumbing or connections to existing plumbing.</i> | |

| | |
|--|-----------------|
| Replace water heater T&P valve | \$379.89 |
| <i>T&P is on back order and could take several weeks to come in.</i> | |

| | |
|-------------------|-------------------|
| Subtotal | \$3,131.21 |
| Total Paid | \$3,131.21 |

| | |
|-----------------------------------|------------|
| Deposit | \$1,379.77 |
| Paid • Due on Jan 24, 2022 | |
| Balance | \$1,751.44 |
| Paid • Due on Feb 23, 2022 | |

Payments

\$1,751.44 on 01/26/2022 (Visa 2032)

\$1,379.77 on 01/24/2022 (Visa 2032)

Send estimates or invoices for your business?

Process \$1,000 in sales free when you sign up for Square.

[Get Started](#)

Arkansas Plumbing Solutions P.O. Box 32 Bauxite AR 72011

arplumbingsolutions@gmail.com

501-326-3766

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[Square Privacy Policy](#) | [Security](#)



CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 3.25.22 Service Account No.: 030035-000
 Customer Name: Kaylee Lawrence Home Phone: _____
 Service Address: 309 SE 3rd St #1 Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-23-22

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

Spigot was turned on while she was out of town.

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>1 month</u> | Amount of Bill: | <u>\$345.60</u> | | | Usage: | <u>194</u> | |
| | Average Bill: | <u>\$38.84</u> | | | Three Month Average Usage: | <u>20</u> | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$180.96</u> | | | Adjusted Bill Amount: | <u>\$164.64</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. |

Cary Ingram

 Customer Service Manager

To Bryant Water Billing Committee,

I hope this finds you well. My name is Kaylee Lawrence and I use Bryant Water services for my apartment (309 SE 3rd St. Apt 1). My primary reason for reaching out is to ask for a bill adjustment.

My water spigot was turned on without my knowledge at some point on January 22-23. It ran for an extended period, skyrocketing my bill.

I was out of town in Memphis from January 20-25 – I have included text message receipts of me texting my mom letting her know I was leaving to go to Memphis, along with a text from my neighbor indicating that my outdoor water spigot was turned on while I was out of town. If you need further proof that I was out of town, I also have Ring doorbell footage showing me leave my apartment on January 20th and returning on the 25th.

I am asking for consideration to reduce the sewage charge from my January bill – if I was not out of town, I would have turned the water off as soon as it came on, but I was 2 hours away with no idea of what was even happening until it was too late. I live alone with my dog Millie, so there was no one else around at my apartment to turn the water off. If you look at my prior usage, you can tell that this uptick is not even remotely close to my usual monthly water usage.

Thank you again for your consideration.

Kaylee Lawrence

9:20 ↶



← 43



Duplex Neighbor >

Yep just got home and my power is on!

Good! Question..Do you do social media?

Sun, Jan 23, 9:14 PM

Hey Kaylee.. It's Kenny. Sorry to bother you while your away..I was wondering if your aware that someone has turned the water on on the faucet behind your appt? I turned it off a couple weeks ago when I noticed the entire backyard was soaked ... It's kinda like that now

Mon, Jan 24, 7:38 AM

Crap. No I didn't know that. Do you mind turning it off for me? I'll be back tomorrow but don't want my bill to be through the roof lol

Mon, Jan 24, 6:02 PM

I turned it off last nite..



Text Message



Apple Pay



CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 3-25-22 Service Account No.: 028748-000
 Customer Name: Destiny Hobbs Home Phone: 361-7311
 Service Address: 1205 Medinah Blvd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3.24.22

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>\$344.57</u> | | | Usage: | <u>303</u> | |
| | Average Bill: | <u>\$49.60</u> | | | Three Month Average Usage: | <u>38</u> | |
| | Adjustment Approved: | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No | | Approved By: | | |
| | Amount of Adjustment to Sewer Bill: | <u>\$236.08</u> | | | Adjusted Bill Amount: | <u>\$108.49</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: |

Custler
Customer Service Manager

FAX- 501-445-5410

Lakes at Hurricane Creek, a Limited Partnership
 P O Box 13000
 Fayetteville,AR 72703

Work Order No. 1508398
Date Call: 03/24/2022 08:25 AM

Status Work Completed

Date Completed: 03/24/2022 01:10 PM
Brief Desc: It's running really bad and runn

Job Site: 0178/1205-MB
 1205 Medinah Blvd.
 Bryant,AR 72022

Caller Name: Destiny Hobbs

Caller Phone: (501) 361-7311x
Occupant: Haynes (t0190746)

Priority: 3-General
OK to enter? YES
Category: Plumbing
Animal in Apt? No

SubCategory: Toilet

Access Notes: I'm in the process of moving so excuse my home!! Lol

Problem Description: It's running really bad and running up my water bill and I need it fixed bad . Also the water people said after you guys fix it to send them a maintenance fix paper so they can adjust my bill thank you so much !

Parts & Labor

| Quantity/ Hours | Item Type/ Employee Name | Description | Unit Price | Total |
|--------------------|-----------------------------|-------------|--------------|-------|
| .00 | Lowe | Lowe | .00 | .00 |
| | | | Total | .00 |

Authorized by: _____
Signed by _____
Dated _____
Invoice No. _____

Full Description It's running really bad and running up my water bill and I need it fixed bad . Also the water people said after you guys fix it to send them a maintenance fix paper so they can adjust my bill thank you so much !

Technician Notes: adjusted toilet flapper, works properly now