

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: June 2022

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

DETAILS

Customer Name	Rea Anderson	Customer Address	3324 Garden Club
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started	5-2-22	Date Leak Repaired	3-26-22
<i>1 month</i> Amount of Bill:	*421.41	Usage:	237
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:	*184.23	Adjusted Bill Amount:	*237.18
Customer Name	James Hood	Customer Address	3508 Stivers Blvd
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started	.	Date Leak Repaired	4-26-22
<i>1 month</i> Amount of Bill:	*470.77	Usage:	265
Average Bill:	*78.22	Three Month Average Usage:	44
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*187.63	Adjusted Bill Amount:	*283.14
Customer Name	One Life Church	Customer Address	8420 HWY 5 N.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5-9-22
<i>2 months</i> Amount of Bill:	*1234.37	Usage:	678
Average Bill:	*123.22	Three Month Average Usage:	61
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*523.83	Adjusted Bill Amount:	*710.54
Customer Name	Westgate-Phillips	Customer Address	604 Prickett Rd.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5-9-22
<i>1 month</i> Amount of Bill:	*3,829.71	Usage:	1910
Average Bill:	*1,690.22	Three Month Average Usage:	610
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*1,103.70	Adjusted Bill Amount:	*2,726.01
Customer Name	Cody Gardner	Customer Address	800 Green Valley
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	4-22
<i>3 months</i> Amount of Bill:	*4,007.41	Usage:	2267
Average Bill:	*72.22	Three Month Average Usage:	40
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*1,890.72	Adjusted Bill Amount:	*2,116.69

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: June 2022

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

DETAILS

Customer Name	Peter Harris			Customer Address	100 Rogers Dr.
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started				Date Leak Repaired	5-12-22
2 months Amount of Bill:	\$523.71			Usage:	293
Average Bill:	\$120 ⁰⁰			Three Month Average Usage:	68
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$191.02			Adjusted Bill Amount:	\$332.69
Customer Name	Rea Anderson			Customer Address	3324 Garden Club Dr.
Date Leak Detected by AMI				Date Customer Notified	
Date Leak Started	3/22			Date Leak Repaired	3/26/22
1 month Amount of Bill:	\$421.41			Usage:	237
Average Bill:	\$38.84			Three Month Average Usage:	20
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:	
Amount of Adjustment to Sewer Bill:	\$184.23			Adjusted Bill Amount:	\$237.18
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	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	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	Approved By:	
Amount of Adjustment to Sewer Bill:				Adjusted Bill Amount:	

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 5-2-22 Service Account No.: 026830-000
 Customer Name: Rea Anderson Home Phone: 501-653-8589
 Service Address: 3324 Garden Club Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 3-26-22

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

Water Service Line Leaking

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

Sworn Statement:

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

Signature

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

FOR OFFICE USE ONLY									
<u>1 month</u>	Amount of Bill:	<u>\$421.41</u>			Usage:	<u>237</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>\$184.23</u>			Adjusted Bill Amount:	<u>\$237.18</u>			
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Cyril Shepard

Customer Service Manager

Ac# 026 830-000

501-653-8589

Gregg Miller Plumbing, LLC
 10 Adobe Court
 Little Rock, AR 72206
 EIN# 88-1213795 MP5763
 501-350-4577

Job Invoice

SOLD TO Rea A. Anderson 3324 Garden Club Dr. Bryant, Ar. 72022	DATE ORDERED 3-26-2022	ORDER TAKEN BY
	PHONE NO.	CUSTOMER ORDER #
	JOB LOCATION	
	JOB PHONE	STARTING DATE
TERMS		

QTY.	MATERIAL	UNIT	AMOUNT	DESCRIPTION OF WORK
1	3/4" Repair Couplings	4200	84.00	Repair Leak on Water Service Line at House
				MISCELLANEOUS CHARGES
				TOTAL MISCELLANEOUS
				LABOR
				HRS. RATE AMOUNT
				2 100 200.00
TOTAL MATERIALS			84.00	TOTAL LABOR 200.00

WORK ORDERED	TOTAL LABOR	200.00
DATE ORDERED	TOTAL MATERIALS	84.00
DATE COMPLETED	TOTAL MISCELLANEOUS	
CUSTOMER APPROVAL SIGNATURE	SUBTOTAL	284.00
	TAX	

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 5-18-2022 Service Account No.: 004660-000
 Customer Name: James Hood Home Phone: _____
 Service Address: 3508 Stivers Blvd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 4-26-22

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

Hot water Heater Lines 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>\$ 470.77</u>			Usage:	<u>265</u>			
		Average Bill:	<u>\$ 78</u>			Three Month Average Usage:	<u>44</u>			
		Adjustment Approved:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		Approved By:				
		Amount of Adjustment to Sewer Bill:	<u>\$ 187.63</u>			Adjusted Bill Amount:		<u>\$ 283.14</u>		
Payment Plan	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.				

Angela Shepard
Customer Service Manager



Compose

Search

Inbox

Outbox

Sent

Drafts

Spam

Trash

Water Billing

Send



No conversations

Start a chat

Search

[waterbilling] Water leak in hot water line slab foundation

Inbox

Sue Hood jasue1214@sbcglobal.net via cityofbryant.com
to waterbilling@cityofbryant.com

To Whom it My Concern

From: James and Sue Hood ACCOUNT# 004660-000

3508 Stivers Blvd.

Bryant, AR. 72022

Phone: 501-847-3343

We were expecting that we would get a really large water bill because of a leak in a hot water line. We do not know when the leak occurred, but it was found by B. R. McGinty plumbers when they came to install a new water heater for us. That was on 4/12/2022. We had them turn the hot water off until repairs could be done.

The McGinty plumbers came back on 4/25/2022 to reroute all of our water lines to the attic. This work was completed.

I am attaching the Job Work Orders for both 4/12/2022 and 4/26/2022 from McGinty. The leak evidently was a leak in the hot water line.

Our water bill just received is \$470.77. I was advised that I could make a payment of the amount on previous bill to the committee. We hope that with this information from us that a considerable reduction of our bill can be made. We will pay whatever balance is left on our bill.

Also, from 4/12/2022 until 4/26/2022 we did not take showers here and could not run our dishwasher.

Thank you for your assistance.

JOB WORK ORDER

478060

PROJECT NO. D-502	NAME [Handwritten Name]	DATE OF ORDER 4-2-88	ESTIMATE NO. [Handwritten]
ADDRESS [Handwritten Address]	CITY [Handwritten City]	STATE [Handwritten State]	ZIP CODE [Handwritten ZIP]
TYPE OF WORK [Handwritten Description]			TYPE OF CONTRACT <input type="checkbox"/> DAY WORK <input checked="" type="checkbox"/> CONTRACT <input type="checkbox"/> EXTRA
DESCRIPTION OF WORK [Handwritten Description]			WORKING HOURS [Handwritten Hours]

[Handwritten notes and calculations]
 Total amount \$ 3200.00
 Paid check # 1158

DATE COMPLETED [Handwritten Date]	TOTAL MATERIALS [Handwritten]	TOTAL LABOR [Handwritten]	TAX [Handwritten]
SIGNATURE [Handwritten Signature]	TOTAL AMOUNT [Handwritten Total]	TOTAL AMOUNT [Handwritten Total]	TOTAL AMOUNT [Handwritten Total]

FORM NO. 1-750

This form is to be used for recording the work done on a job. It should be filled out by the contractor and submitted to the client upon completion of the work.

JOB WO

520

DISTORDER ORDER NO		PHONE		MECHANIC		DATE OF ORDER	
9115				C. W. ...		4/1	
NAME				ADDRESS			
JAMES ...				3508 S. ...			
CITY				STATE			
ZIP				COUNTRY			

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 5-10-22 Service Account No.: 023807-000
 Customer Name: One Life Church Home Phone: _____
 Service Address: 8420 HWY 5 N. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5-9-22

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

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

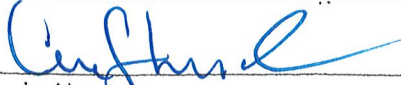
Sworn Statement:

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

Signature

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

FOR OFFICE USE ONLY									
<u>2 months</u>		Amount of Bill:	<u>*1234.37</u>			Usage:	<u>678</u>		
		Average Bill:	<u>*123.00</u>			Three Month Average Usage:	<u>61</u>		
		Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By: _____				
		Amount of Adjustment to Sewer Bill:	<u>523.83</u>			Adjusted Bill Amount:	<u>5710.54</u>		
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.


Customer Service Manager

Intertech Maintenance Group

714 Calhoun Street
 Little Rock, AR 72202

O: 501-246-0400

E: info@intertechmaint.com

AC# 023807-000
 one life church

Invoice



Bill To

Deerman, Michael
 8420 AR-5 N
 Alexander, AR 72002

Date: 5/9/2022
 Invoice #: 26695

Terms	Work Order / Job
Due on receipt	220726090746R

1	Plumbing Service Call	0.00	0.00
	Deerman, Michael 8420 AR-5 N Alexander, AR 72002		
1	Labor Cost	1,380.00	1,380.00
1	Material Cost	460.69	460.69
1	Travel Fee	0.00	0.00
	Total		1,840.69

Total \$1,840.69
Payments \$0.00
Balance Due \$1,840.69

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 5-16-22 Service Account No.: 001313-000
 Customer Name: Westgate Phillips Home Phone: _____
 Service Address: 604 Prickett Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5-9-22

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

2" Tee 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										
/ month		Amount of Bill:	<u>3,829.71</u>			Usage:	<u>1910</u>			
		Average Bill:	<u>1,690.00</u>			Three Month Average Usage:	<u>610</u>			
		Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Approved By:				
		Amount of Adjustment to Sewer Bill:	<u>1,103.90</u>			Adjusted Bill Amount:		<u>2,726.01</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



Ac# 001313-000

BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Westgate Apartments Water Bill

1 message

Darcy Adams <dadams@pdccompanies.com>
To: "waterbilling@cityofbryant.com" <waterbilling@cityofbryant.com>
Cc: Synthia Williamson <synthia@pdccompanies.com>

Mon, May 16, 2022 at 2:40 PM

Good afternoon,

I am attaching a copy of the invoice for the last water bill for this apartment complex. I have also attached an invoice for the repair of the leak that was causing the higher bill. Would it be possible for you to remove the sewer charges from the invoice?

Thanks!

Darcy Adams
PDC Companies | Regional Managing Agent
1501 North University, Suite 740 | Little Rock, Arkansas 72207
Office: 501.666.9629 | Fax: 501.666.3559 | Direct: 501.492.7563

www.pdccompanies.com | www.pdcconstruction.net

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-----Original Message-----

From: ricoh@pdccompanies.com <ricoh@pdccompanies.com>
Sent: Monday, May 16, 2022 2:30 PM
To: Darcy Adams <dadams@pdccompanies.com>
Subject: Scanned from a Xerox Management

Please open the attached document.

Attachment File Type: pdf, Multi-Page

Multifunction Printer Location:
Device Name: Xerox Management

 **220516143005.pdf**
147K



RECEIVED MAY 11 2022

INVOICE

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

INVOICE DATE	INVOICE #
5/9/2022	48228

BILLING ADDRESS	
PDC Companies Linda Cook 1501 N. University Ave. Suite 740 Little Rock, AR 72207	

SITE ADDRESS	
West Gate Apartment 604 Prickett Rd Bryant, AR 72022	

Claim # / P.O. #	Payment Terms	Completion Date	Tech	Billing Phone
	Due on receipt	5/6/2022	Levi	501-666-9629
ITEM	DESCRIPTION	QTY	AMOUNT	
1	Leak Detection-Indu... ALD performed a complete commercial leak detection to reveal a leak between the buildings near the sidewalk. ALD exposed the leak on a 2" tee. ALD made the proper repairs and upon completion of repairs the system was retested to verify no other leaks exist. The hole was back filled. ALD is not responsible for any landscaping. 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.		2,700.00	
	Landscaping ALD is not responsible for any landscaping upon completion of repairs.		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 SASTISFACTORY 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.



RECEIVED MAY 11 2022

INVOICE

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

INVOICE DATE	INVOICE #
5/9/2022	48228

BILLING ADDRESS	
PDC Companies Linda Cook 1501 N. University Ave. Suite 740 Little Rock, AR 72207	

SITE ADDRESS	
West Gate Apartment 604 Prickett Rd Bryant, AR 72022	

Claim # / P.O. #	Payment Terms	Completion Date	Tech	Billing Phone
	Due on receipt	5/6/2022	Levi	501-666-9629
ITEM	DESCRIPTION	QTY	AMOUNT	
	Sales Tax			0.00
Please remit payment to above address.			Total	\$2,700.00

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.

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I FIND THE WORK SASTISFACTORY 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.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 4/22 Service Account No.: 002364-000
 Customer Name: Cody Gardner Home Phone: _____
 Service Address: 800 Green Valley Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 4/22

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

Flush Valve causing 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>4007.41</u>			Usage:	<u>2267</u>		
		Average Bill:	<u>72.00</u>			Three Month Average Usage:	<u>40</u>		
		Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Approved By: _____			
		Amount of Adjustment to Sewer Bill:	<u>1,890.72</u>			Adjusted Bill Amount: <u>2,116.69</u>			
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Cody Gardner

Customer Service Manager

ACT# 002566-000

I contacted a plumber to come check out the house. Everyone I called was 3 weeks out, so I got in touch with a man named Alex that works for Stk Quality Plumbing. He said he could come do the inspection and possible repairs after hours off the clock for cash payment. He arrived on the 14th of April and said we had a "Flush valve" not sealing in one toilet. Went to lowes, bought a new one & installed it. Checked the leak detector at meter and all was good he said.

Thank You,

x Gaby Gracher

x Gaby Gracher

800 Green Valley Drive

501-794-7927

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 5/2022 Service Account No.: 027348-000
 Customer Name: Peter Harris Home Phone: _____
 Service Address: 100 Rogers Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5-12-22

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>\$523.71</u>			Usage:	<u>293</u>		
		Average Bill:	<u>\$120.93</u>			Three Month Average Usage:	<u>68</u>		
		Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Approved By: _____			
		Amount of Adjustment to Sewer Bill:	<u>\$191.02</u>			Adjusted Bill Amount: <u>\$332.69</u>			
Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment Amt.			

Aug Shepard

Customer Service Manager

AC# 027348-000

501-654-4458
SCOTT



How doers
get more done.

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

1405 00008 52574 05/12/22 04:30 PM
SALE CASHIER MORGAN

078000082401 200Z DR PEPP <A>	2.18
200Z DR PEPPER	
049000000443 200Z COKE <A>	2.18
200Z CLASSIC COCA-COLA	
017801137101 FEIT LED <A>	7.97
FEIT A19 LED COLOR CHANGING	
732109900126 DISFECT SPRY <A>	3.98
ODOBAN DISINFECT AERO LINEN 14.60Z	
049057104859 2X FLAPPER <A>	9.98
KORKY ULTRA 2X FLAPPER	
* 6972761082066 SEAL <A>	1.98
FLUSH VALVE SEAL FOR MANSFIELD	
034000002290 CANDY <A>	2.47
KIT KAT KS 30Z	
040000424314 CANDY <A>	1.97
SNICKERS 1.860Z	
040000002635 CANDY <A>	2.47
SNICKERS KS 3.290Z	
842674050147 SOLARSPOTBLK <A>	7.88
OFFSHELF HB BLK SOLAR SPOTLIGHT	
040000004059 CANDY <A>	2.47
TWIX CARAMEL KS 3.020Z	

SUBTOTAL 45.53
SALES TAX 3.96
TOTAL \$49.49

XXXXXXXXXXXX5816 HOME DEPOT

USD\$ 49.49
TA

AUTH CODE 012970/5084750

Chip Read

ATB: A000000004999908400303

THD PLCC CON

1405 05/12/22 04:30 PM



1405 08 52574 05/12/2022 1578

RETURN POLICY DEFINITIONS		
POLICY ID	DAYS	POLICY EXPIRES ON
A	11	365 05/12/2023

DID WE NAIL IT?

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

Opine en español

www.homedepot.com/survey

User ID: H8B 106842 105445
PASSWORD: 22262 105437

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

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 5-26-22 Service Account No.: 026830-000
 Customer Name: Rea Anderson Home Phone: 653-8589
 Service Address: 3324 Garden Club Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3-26-22

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

Water Service Line Leaking

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

Sworn Statement:

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

Signature _____

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

FOR OFFICE USE ONLY									
<u>1 month</u>	Amount of Bill:	<u>\$421.41</u>			Usage:	<u>237</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>\$184.23</u>			Adjusted Bill Amount:	<u>\$237.18</u>			
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Chris Stepan
 Customer Service Manager

Gregg Miller Plumbing, LLC
 10 Adobe Court
 Little Rock, AR 72206
 EIN# 88-1213795 MP5763
 501-350-4577

Kia Anderson
 501-653-8589
 026830.000

Job Invoice

DATE ORDERED <i>3-26-2022</i>		ORDER TAKEN BY
SOLD TO <i>Rea A. Anderson</i>		PHONE NO.
<i>3324 Garden Club Dr.</i>		CUSTOMER ORDER #
<i>Bryant, Ar. 72022</i>		JOB LOCATION
JOB PHONE	STARTING DATE	
TERMS		

QTY.	MATERIAL	UNIT	AMOUNT	DESCRIPTION OF WORK
<i>2</i>	<i>3/4 Repair Couplings</i>	<i>1/2"</i>	<i>84.00</i>	<i>Repair Leak on Water Service Line at House</i>
				MISCELLANEOUS CHARGES
				TOTAL MISCELLANEOUS
		LABOR	HRS.	RATE
		<i>2</i>	<i>100</i>	<i>200.00</i>
		AMOUNT		
		<i>200.00</i>		
TOTAL MATERIALS		<i>84.00</i>	TOTAL LABOR	
			<i>200.00</i>	

WORK ORDERED	TOTAL LABOR	<i>200.00</i>
DATE ORDERED	TOTAL MATERIALS	<i>84.00</i>
DATE COMPLETED	TOTAL MISCELLANEOUS	
CUSTOMER APPROVAL SIGNATURE	SUBTOTAL	<i>284.00</i>
AUTHORIZED SIGNATURE <i>Gregg Miller</i>	TAX	
A-2817-3817 / T-3866	GRAND TOTAL	<i>284.00</i>