

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: August 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	RNR Investments	Customer Address	304 N. Reynolds
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	7-8-22
<i>2 months</i> Amount of Bill:	*1,611.07	Usage:	933
Average Bill:	*149.36	Three Month Average Usage:	74
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*666.46	Adjusted Bill Amount:	*944.61
Customer Name	J.J. Caldwell	Customer Address	3819 Stillman Ln
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	6/23/22
<i>2 months</i> Amount of Bill:	875.47	Usage:	505
Average Bill:	*90 ⁰⁰	Three Month Average Usage:	55
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*371.23	Adjusted Bill Amount:	*504.24
Customer Name	Amber Hargrave	Customer Address	1703 Boone Rd
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	6/16/22
<i>3 months</i> Amount of Bill:	*668.33	Usage:	373
Average Bill:	*102.04	Three Month Average Usage:	64
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*153.65	Adjusted Bill Amount:	*514.68
Customer Name	Franklin Washburn	Customer Address	408 Whirlwind
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/31/22
<i>2 months</i> Amount of Bill:	*1,023.55	Usage:	589
Average Bill:	*27.84	Three Month Average Usage:	15
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*466.09	Adjusted Bill Amount:	*557.46
Customer Name	Mrs Parker	Customer Address	602 Colonial Dr
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	7/22
<i>2 months</i> Amount of Bill:	*3158.16	Usage:	4341
Average Bill:	*73.18	Three Month Average Usage:	106
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*1,657.37	Adjusted Bill Amount:	*1,500.79

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Total Gallons Adjusted	Total Cost of Adjustments

DETAILS

Customer Name	BSFR Property Mgmt	Customer Address	3903 Stillman Ln
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/4/22
2 months - Amount of Bill:	\$ 932.73	Usage:	525
Average Bill:	\$ 78.00	Three Month Average Usage:	43
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$ 372.70	Adjusted Bill Amount:	\$ 560.03
Customer Name	Liliana Rosas	Customer Address	9511 Hwy 5N Lot 39
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	7/1/22
2 months - Amount of Bill:	\$ 587.08	Usage:	333
Average Bill:	New Customer	Three Month Average Usage:	—
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$ 248.75	Adjusted Bill Amount:	\$ 338.33
Customer Name	Jose Beltran	Customer Address	16 Eastwood Dr
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	6-28-22
2 months - Amount of Bill:	\$ 1,251.83	Usage:	706
Average Bill:	\$ 77.63	Three Month Average Usage:	42
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$ 528.07	Adjusted Bill Amount:	\$ 723.76
Customer Name	Chris Spann	Customer Address	2402 Richland Park
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	7-2-22
2 months - Amount of Bill:	\$ 477.88	Usage:	267
Average Bill:	\$ 90	Three Month Average Usage:	48
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$ 145.17	Adjusted Bill Amount:	\$ 332.71
Customer Name	Austin Hawley	Customer Address	601 SW 4th St.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	7-15-22
3 months - Amount of Bill:	\$ 1,073.50	Usage:	610
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:	\$ 466.94	Adjusted Bill Amount:	\$ 606.56

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

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Date: August 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	Bill Smith	Customer Address	1205 Oak Glenn
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/18/22
Amount of Bill:	*512.33	Usage:	365
Average Bill:	*61.76	Three Month Average Usage:	33
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*253.85	Adjusted Bill Amount:	*258.48
Customer Name	Gerald Goodwin	Customer Address	2629 Mills Park
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	6-29-22
Amount of Bill:	*697.03	Usage:	408
Average Bill:	*57.82	Three Month Average Usage:	37
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*252.14	Adjusted Bill Amount:	*444.89
Customer Name	William Horner	Customer Address	7202 Kynlee Cr
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:	*722.45	Usage:	414
Average Bill:	*53.00	Three Month Average Usage:	33
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	*323.47	Adjusted Bill Amount:	*398.98
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: 6-11-22 Service Account No.: 029835-000
 Customer Name: RNR Investments Home Phone: 479-751-0445
 Service Address: 304 N Reynolds Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 7/8/22

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

Toilet Leaking & Supply Lines

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

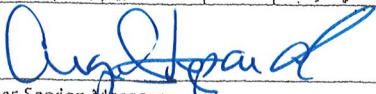
Sworn Statement:

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:		\$1,611.07			Usage:		933	
		Average Bill:		\$149.36			Three Month Average Usage:		74	
		Adjustment Approved:		Yes <input type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:		\$666.46			Adjusted Bill Amount:		\$944.61	
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



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] Adjustment - Account 029835-000

1 message

debjackson@rentalconcepts.org <debjackson@rentalconcepts.org>

Mon, Jul 11, 2022 at 11:40 AM

To: waterbilling@cityofbryant.com

Cc: Teresa Brooks <tbrooks@rentalconcepts.org>

City of Bryant Water Department,

Last month we contacted the water department after receiving the attached water bill. We were told that once we had the problem fixed to forward a copy of the invoice showing what work was done to fix the issue. Attached is the invoice from J. Dodson Plumbing dated July 8, 2022 for repairs completed at 304 N. Reynolds Road to fix the excessive use of water. We appreciate if you would consider a billing adjustment for account 029835-000. Please let us know if any other information is needed.

Thank you,

Debra Jackson

Controller

Rental Concepts, LLC

PO Box 8140

Springdale, AR 72766

Phone: 479-751-0445

Fax: 479-751-0449

2 attachments **2022.07.08 J. Dodson Plumbing K1486.pdf**
42K **2022.06.10 City of Bryant 35-000.pdf**
501K

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 7-5-22 Service Account No.: 002434-000
 Customer Name: J.J. Caldwell Home Phone: 804-836-0089
 Service Address: 3819 Stillman Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 6-23-22

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

Faucet in tub 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>*875.47</u>			Usage:	<u>505</u>		
		Average Bill:	<u>-90.00</u>			Three Month Average Usage:	<u>55</u>		
		Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By:				
		Amount of Adjustment to Sewer Bill:	<u>*371.23</u>			Adjusted Bill Amount:	<u>*504.24</u>		
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.

Chris Stepanek
 Customer Service Manager

Acct#
002434000

Wendy Caldwell

SERVICE WORK ORDER

DENNY DYER PLUMBING CO.

All Phases of Home Remodels and Plumbing Repairs

PHONE 778-6453 Day or Night

1022 RIVER ROAD • BENTON, AR 72015

SERVICE INVOICE

No. 1374

Customer's Order No.	Phone	Mechanic	Helper	Date of Order
				6-23-22
Bill To	Order Taken By			Date
Address	Wendy Caldwell			
City	3819 Hillman Way			<input type="checkbox"/> Day Work
Job Name and Location	Benton			<input type="checkbox"/> Contract
Work Ordered By				<input type="checkbox"/> Extra

Job Phone
804-836-2089

DESCRIPTION OF WORK

Repair to faucet 1/10-

804-836-0089

002434-000

	TOTAL MATERIALS		
	TOTAL LABOR		
	TAX		
	TOTAL AMOUNTS		

No One Home Date Completed

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: 7-5-22 Service Account No.: 008651-000
 Customer Name: Amber Hargrave Home Phone: 680-1656
 Service Address: 1703 Boone Rd. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 6-16-22

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>3 months</u>		Amount of Bill:		<u>*668.33</u>		Usage:		<u>373</u>	
		Average Bill:		<u>*102.04</u>		Three Month Average Usage:		<u>64</u>	
Adjustment Approved:		Yes <input type="checkbox"/>		No <input type="checkbox"/>		Approved By:			
Amount of Adjustment to Sewer Bill:		<u>\$153.65</u>		Adjusted Bill Amount:		<u>\$514.68</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.			

Amber Hargrave
Customer Service Manager

AC # 008651-000

Matlock Rooter Services LLC

6100 Getty Dr Suite W
North Little Rock, AR 72117
LIC # MP4883

matlockrooterservices@yahoo.com

Amber Hargrave
1703 Boone Rd
Bryant, AR 72022

501-680-1656

Service Date: 06/16/2022

Upon arrival, found the water heater to be leaking from the casing. Replaced the 40 gallon electric water heater with a new one supplied by First American home warranty. Installed an expansion tank, pan, and drain line. Found no leaks when finished.

Should you have any questions, please do not hesitate to contact us.

Thanks,
Caitlin Matlock
501-864-6272

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 11-5-22 Service Account No.: 011145-000
 Customer Name: Franklin Washburn Home Phone: 519-7734
 Service Address: 408 Whirlwind St Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 513122

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>\$1023.55</u>			Usage:	<u>589</u>		
		Average Bill:	<u>\$27.84</u>			Three Month Average Usage:	<u>15</u>		
		Adjustment Approved:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Approved By: _____				
		Amount of Adjustment to Sewer Bill:	<u>\$466.09</u>			Adjusted Bill Amount:	<u>\$557.46</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.	_____		

[Signature]
Customer Service Manager

Acct# 011145-000

Greens at Hurricane Creek, a Limited Partnership

P O Box 13000
Fayetteville,AR 72703

Work Order No.

1607890

Date Call:

05/31/2022 10:41 AM

Status

Work Completed

Date Completed:

05/31/2022 11:34 AM

Brief Desc:

Leaking toilet. Water is running al

Job Site:

0114/0408
408 Whirlwind Street
Bryant,AR 72022

Caller Name:

Franklin Washburn

Caller Phone:

(501) 519-7734x

Occupant:

Washburn (t0013280)

Office

(501) 519-7734x

Priority:

3-General

Ok to enter?

YES

Category:

Other

SubCategory:

Other

Animal in Apt?

No

Access Notes:

Anytime. Will be in and out all day.

Problem Description:

Leaking toilet. Water is running all the time. Need fixed ASAP.

Parts & Labor

Quantity/ Hours	Item Type/ Employee Name	Description	Unit Price	Total
.00	Jemerson	Jemerson	.00	.00
			Total	.00

Authorized by:

Signed by

Dated

Invoice No.

Full Description

Leaking toilet. Water is running all the time. Need fixed ASAP.

Technician Notes:

Replaced seal

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7/22 Service Account No.: 009244-000
 Customer Name: Mrs. Parker Home Phone: 231-2413
 Service Address: 602 Colonial Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 7.22

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

Repaired all main line leaks

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

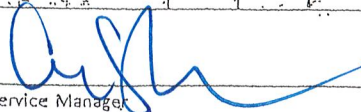
Sworn Statement:

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>\$3158.16</u>			Usage:	<u>4341</u>	
	Average Bill:	<u>\$73.18</u>			Three Month Average Usage:	<u>100</u>	
	Adjustment Approved:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Approved By:			
	Amount of Adjustment to Sewer Bill:	<u>\$1657.37</u>			Adjusted Bill Amount:	<u>\$1500.79</u>	
Payment Plan	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/>	6 Months <input type="checkbox"/>	Payment Amt.	


Customer Service Manager

501-231-2413

Acct# 009244-000 Margie Parker
~~Acct# 004413-000~~

Thank you!
(Smiley face)

Paid w/
Check # 2833

ABI SYSTEMS

Advanced By Irrigation

47 N. Double Springs Rd. • Farmington, AR 72730 • 479.305.0270
abi.systems@yahoo.com • Little Rock 501.672.9347

INVOICE

Date _____

Contact Person		Margie Parker	
Company			
Address		602 Colonial Dr, Bryant AR	
Phone		501-231-2413	Fax
Qty.	Description	Price	
	Repaired All main line leaks causing High utility water bill. Insulated above valve to eliminate other small leaks in yard		
1	1" Valve DV		32.00
2	3/4" couplings		.94
260	Grassie Sprinkler		60
1	6" Valve Box		12.50
4	hrs labor		600
<input type="radio"/> Paid Check No. _____ <input type="radio"/> Paid Cash _____ <input type="radio"/> Paid CC _____ Due Date _____ Job Completed By _____ Signature _____		Subtotal	705.52
		Less Discount	
		Shipping/Delivery	
		Subtotal	705.52
		Tax	51.74
		Sub Total	
		Deposit	
		TOTAL	779.52

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 6/30/22 Service Account No.: 029726-000
 Customer Name: B5FR Property Mgmt Home Phone: _____
 Service Address: 3903 Stillman Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5/14/22

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

Line Leaking

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

Sworn Statement:

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

Signature _____

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

FOR OFFICE USE ONLY							
<u>2 months</u>	Amount of Bill:	<u>\$932.73</u>			Usage:	<u>525</u>	
	Average Bill:	<u>\$478.00</u>			Three Month Average Usage:	<u>43</u>	
	Adjustment Approved:	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	Approved By:			
	Amount of Adjustment to Sewer Bill:	<u>\$372.00</u>			Adjusted Bill Amount:	<u>\$560.03</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.	

[Signature]
Customer Service Manager



Acct# 029726-000

Lesa Warner <lwarner@cityofbryant.com>

[waterbilling] Credit Adjustment Request - 3903 STILLMAN LOOP BRYANT, AR 72022

1 message

Utility Processing <up@simplebills.com>

Thu, Jun 30, 2022 at 3:46 PM

To: "waterbilling@cityofbryant.com" <waterbilling@cityofbryant.com>

Hi -

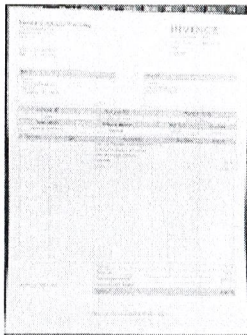
Good day! I am emailing you on behalf of BSFR Property Management LLC. We would like to request a bill adjustment on 3903 STILLMAN LOOP BRYANT, AR 72022 based on the attached work order. Please advise once all set or if you need more information. Thank you!

Best,

Chiqui

Utility Processor | 254-323-8843

ref:_00Df21GhV5._5005x1inwyh:ref



3903 Stillman Loop Hot water heater.jpg
81K

Acct#
029726-000

Service Solutions Plumbing

7500 Highway 147 N
Shandin, AR 72150
USA

Voice: 870-942-5023
Fax: 870-942-1893

INVOICE

Invoice Number: 4082
Invoice Date: May 4, 2022
Page: 1
Duplicate

Bill To:

Correx
1505 King Street Ext
Ste 100
Charleston, SC 29405

Ship to:

Correx
3903 Stinson Loop
Bryant, AR 72022

Customer ID	Customer PO	Payment Terms	
Correx	Bid 65992 PO 100461	Net 30 Days	
Sales Rep ID	Shipping Method	Ship Date	Due Date
James M Donaldson	Airborne	5/3/22	6/3/22

Quantity	Item	Description	Unit Price	Amount
		Run new hot water service in home for 2.5 bathrooms, washer, and kitchen.		
		Price Per Quote 3068.00		
		Materials		251.06
		Labor		2,792.13
Subtotal				3,043.21
Sales Tax				24.79
Total Invoice Amount				3,068.00
Payment Credit Applied				
TOTAL				3,068.00

Check/Credit Memo No.

Quotative invoices are subject to 2% late charge.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-22 Service Account No.: 031413-000
 Customer Name: Lilana Rosas Home Phone: 817-5823
 Service Address: 9511 HWY 5 N 6139 Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 7-1-22

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

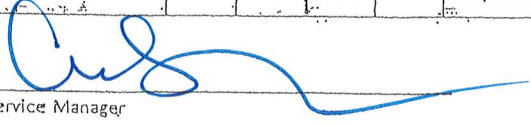
Sworn Statement:

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											
2 months		Amount of Bill:		*589.08				Usage:		333	
		Average Bill:		New Customer				Three Month Average Usage:		—	
		Adjustment Approved:		Yes		No		Approved By:			
		Amount of Adjustment to Sewer Bill:		*248.15				Adjusted Bill Amount:		*338.33	
Payment Plan		Yes		No		Payment Period		3 Months		6 Months	
								Payment Amt.			


Customer Service Manager

acct#

Meliana

Liliana Rosas

9511 Hwy 5 NORTH
LOT. 39

Alexander Ar.
72002

5018175823

Acct#
031413-000



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

- SALE -

SALES# 1STLANE2 13 TRANSH: 5686536 07-01-22

795256 KORRY 2 IN COMPLETE KIT 24.98

SUBTOTAL:	24.98
TAX:	2.47
INVOICE 05793 TOTAL:	27.45
CASH:	30.00
CHANGE:	2.55

STORE: 2471 TERMINAL: 05 07/01/22 09:42:16

OF ITEMS PURCHASED: 1
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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

STORE MANAGER: JAMIE PAGE

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

 * SHARE YOUR FEEDBACK! *
 * ENTER FOR A CHANCE TO BE *
 * ONE OF FIVE \$500 WINNERS DRAWN MONTHLY! *
 * ENTRE EN EL SORTEO MENSUAL *
 * PARA SER UNO DE LOS CINCO GANADORES DE \$500! *
 * *
 * ENTER BY COMPLETING A SHORT SURVEY *
 * WITHIN ONE WEEK AT: www.lowes.com/survey *
 * YOUR ID #057932 247121 824585 *
 * *
 * NO PURCHASE NECESSARY TO ENTER OR WIN. *
 * VOID WHERE PROHIBITED. MUST BE 18 OR OLDER TO ENTER. *
 * OFFICIAL RULES & WINNERS AT: www.lowes.com/survey *
 * *****

STORE: 2471 TERMINAL: 05 07/01/22 09:42:16

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

LEAK ADJUSTMENT REQUEST

Date of Request: 7/5/22 Service Account No.: 030647-000
 Customer Name: Jose Beltran Home Phone: 817-2187
 Service Address: 16 Eastwood Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 6-28-22

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

Leak in bathroom

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

Sworn Statement:

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

Signature

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

FOR OFFICE USE ONLY							
<u>2 months</u>	Amount of Bill:	<u>1,251.83</u>			Usage:	<u>706</u>	
	Average Bill:	<u>177.63</u>			Three Month Average Usage:	<u>42</u>	
	Adjustment Approved:	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Approved By:			
	Amount of Adjustment to Sewer Bill:	<u>528.07</u>			Adjusted Bill Amount:	<u>723.76</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

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-7-22 Service Account No.: 011845-001
 Customer Name: Chris Spann Home Phone: 859-5950
 Service Address: 2402 R. Highland Park Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 7.2.22

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>\$477.88</u>			Usage:		<u>267</u>	
		Average Bill:		<u>\$90</u>			Three Month Average Usage:		<u>48</u>	
		Adjustment Approved:		Yes <input type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:		<u>\$145.17</u>			Adjusted Bill Amount:		<u>\$332.71</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.		

Chris Spann

Customer Service Manager



Lajena Holt <lholt@cityofbryant.com>

[waterbilling] Bill Adjustment/receipt of repair

1 message

Acct# 017845-001

CSpann <cspann1990@gmail.com>
To: waterbilling@cityofbryant.com

Thu, Jul 7, 2022 at 11:18 AM

My information:
Chris Spann 501-859-5950
2402 Richland Park Dr, Bryant, AR 72022

Good morning!

I was told that if I sent receipts showing the repairs that my bill could be adjusted. This past bill was about \$227 where I'm normally around \$100 or less. Hopefully these receipts can adjust that bill and the upcoming bill. The issue turned out to be my water heater. I have the receipt attached showing my payment to Americam Home Shield of \$82.41. The warranty company shows my address as service address and that it's for the water heater. They sent out All Drain 70 plumbing and I have the receipt attached showing payment I made to them today for repairs in the ammount of \$215.

2 attachments

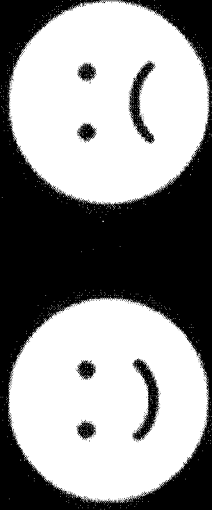


Screenshot_20220707-110237_Gmail.jpg
791K



Screenshot_20220707-110137_Chrome.jpg
493K

Greg Connor Master Plumber



Let Greg Connor Master Plumber
know how your experience was

\$215.00

Custom Amount x 1

\$215.00



< Back to Dashboard

Service: #130443428

View Service Report

Status

Complete

[Complete Survey](#)

Service Contractor

ALL DRAINS 70

[501-909-9172](tel:501-909-9172)

Service Appointment

Upcoming

Service Summary



Water Heater

Covered Property 2402 Richland Park Dr, 72022

Payment

Service Fee \$75.00

Tax \$7.41

Total Amount Paid \$82.41

[Download Your Contract](#)

✓ American Home Shield

✓ MyAccount

✓ Member Benefits



CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-15-22 Service Account No.: 031113-000
 Customer Name: Austin Hawley Home Phone: _____
 Service Address: 601 SW 4th St. Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 7-15-22

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

Toilet Leak

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

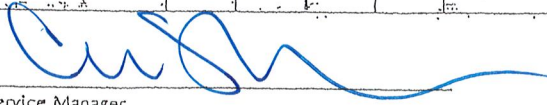
Sworn Statement:

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

Signature _____

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

FOR OFFICE USE ONLY									
3 months		Amount of Bill:	\$1073.50			Usage:	600		
		Average Bill:	\$38.84			Three Month Average Usage:	20		
		Adjustment Approved:	Yes	<input checked="" type="checkbox"/>	No	Approved By:			
		Amount of Adjustment to Sewer Bill:	\$466.94			Adjusted Bill Amount:	\$606.56		
Payment Plan	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	Payment Period	3 Months	<input type="checkbox"/>	6 Months	Payment Amt.



Customer Service Manager

SERVICE WORK ORDER
DENNY DYER PLUMBING CO.
 All Phases of Home Remodels and Plumbing Repairs
 PHONE 778-6453 Day or Night
 1022 RIVER ROAD • BENTON, AR 72015

SERVICE INVOICE

No. 1430

Customer's Order No.		Phone	Mechanic	Helper	Date of Order 7-15-22
Bill To John Dyer					Order Taken By
Address 601 SW 4th Street					<input type="checkbox"/> Day Work
City Benton					<input type="checkbox"/> Contract
Job Name and Location 601 SW 4th Street					<input type="checkbox"/> Extra
Work Ordered By				Job Phone 778-0417	

DESCRIPTION OF WORK

Water leak in commode
 Fix
 JL

18.00
 110.00
 128.00

	TOTAL MATERIALS		
	TOTAL LABOR		
	TAX		
<input type="checkbox"/> No One Home	Date Completed	TOTAL AMOUNTS	

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

Brought in by landlord on 7-15-2022

601 SW 4th Street } Repair
 Austin Hawley }

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-22-22 Service Account No.: 020783-000
 Customer Name: Bill Smith Home Phone: _____
 Service Address: 1205 Oak Glen Ln Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5/18/22

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

Water Line Leaking in yard

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:		\$512.33		Usage:		365	
		Average Bill:		\$61.76		Three Month Average Usage:		33	
Adjustment Approved:		Yes <input type="checkbox"/>		No <input type="checkbox"/>		Approved By:			
Amount of Adjustment to Sewer Bill:		\$253.85		Adjusted Bill Amount:		\$258.48			
Payment Plan		Yes <input type="checkbox"/>		No <input type="checkbox"/>		Payment Period		3 Months <input type="checkbox"/>	
						6 Months <input type="checkbox"/>		Payment Amt. <input type="checkbox"/>	

Chris Dwyer
Customer Service Manager



BrendaJ Lee <bjlee@cityofbryant.com>

[waterbilling] water bill

1 message

Bill Smith <smithwh78@gmail.com>

Fri, Jul 22, 2022 at 12:28 PM

To: waterbilling@cityofbryant.com

Acct # - 020783-000

Address - 1205 Oak Glenn Loop, Bryant, AR 72022

Hello,

We had a water leak in our yard that went unnoticed and caused a much higher than normal water usage during April and May which resulted in bills that have been 3 to 4 times what our normal billing is. Also a sewage consumption charge was added to our bill, however since all this water drained directly into our yard the vast bulk of it didn't drain back into the city sewage. Please remove the sewage consumption charge from our bill, and would it also be possible to adjust the water billing charges to account for the amount above average caused by the leak? Attached is the receipt of payment for the plumbing repair to stop the leak.

Thank you,
Bill Smith

**Payment_Receipt_from_Apex_Comfort_Solutions_Inc_21836.pdf**

103K



15440 Big Ridge Road Alexander, AR 72002
(501) 326-8927 | service@apexcomfort.net
Plumbing License #MP-5449 | HVACR License #0000830

Payment Receipt

Received From
Bill & Lori Smith 1205 Oak Glenn Loop Bryant, AR 72022

Date	7/20/2022
Payment Method	PayPal
Check/Ref No	

Payment Amount	\$254.43
Total Amount Due	\$0.00

Invoices Paid

Date	Invoice Number	Amount Due	Amount Applied
5/18/2022	2156	\$254.43	\$254.43

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-19-22 Service Account No.: 001036-000
 Customer Name: Gerald Goodin Home Phone: 847-2489
 Service Address: 2629 Mills Park Rd Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: 6-29-22

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

3/4 pack joint male adapter 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>\$697.03</u>			Usage: <u>408</u>				
		Average Bill: <u>\$57.87</u>			Three Month Average Usage: <u>37</u>				
Adjustment Approved:		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	Approved By:					
Amount of Adjustment to Sewer Bill:		<u>\$252.14</u>			Adjusted Bill Amount: <u>\$444.89</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

Plumbing-Heat & Air

Sanders Service Company
4721 Hillard Rd
North Little Rock, AR 72118
501-374-0117

Invoice 47109239
Invoice Date 6/29/2022
Completed Date 6/29/2022
Customer PO

Billing Address
Gerry Goodin
2629 Mills Park Road
Bryant, AR 72022 USA

Job Address
Gerry Goodin
2629 Mills Park Road
Bryant, AR 72022 USA

Description of Work

Fixed customers waterline in her yard customer has a gray quest pipe no warranty used a brass pack joint to repair capped off line goes to old building in the back of the property

Task #	Description	Quantity	Your Price	Your Total
Plumbing Labor Rate - NM	Labor Rate - non-mechanical	1.00	\$136.78	\$136.78

Materials

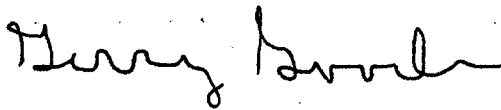
Material	Description	Quantity	Your Price	Your Total
3/4 pack joint male adapter	3/4 pack joint male adapter	1.00	\$83.22	\$83.22

Paid On	Type	Memo	Amount
6/29/2022	Cash	paid cash	\$220.00

Potential Savings	\$22.01
Sub-Total	\$220.00
State sales tax 6.5%	\$0.00
Bryant 3%	\$0.00
Saline Co 0.38%	\$0.00
Total Due	\$220.00
Payment	\$220.00
Balance Due	\$0.00

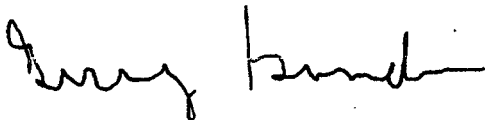
WE HAVE MOVED PLEASE UPDATE YOUR RECORDS WITH NEW ADDRESS

I hereby authorize Sanders Plumbing, Inc., DBA Sanders Service Company of Central Arkansas, to perform the scope of work outlined above and agree to the terms and conditions as stated.



6/29/2022

I have inspected and am satisfied with the scope of work completed by Sanders Service Company. I agree to pay for all work, goods and services received.



6/29/2022

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 7-22-2022 Service Account No.: 025014-000
 Customer Name: William Horner Home Phone: 940-3429
 Service Address: 1202 Kynlee Cr Work Phone: _____
 City: Bryant State, Zip: AR, 72022
 Date Leak Detected: _____ Date Repaired: _____

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

Sprinkler meter leaking

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

Customer just shut system off did not fix
 I explained to customer he could purchase
 an irrigation meter so he would not pay
 for sewer.

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										
Amount of Bill:				<u>\$722.45</u>			Usage:		<u>414</u>	
Average Bill:				<u>\$53.00</u>			Three Month Average Usage:		<u>33</u>	
Adjustment Approved:				<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			Approved By:			
Amount of Adjustment to Sewer Bill:				<u>\$323.47</u>			Adjusted Bill Amount:		<u>\$398.98</u>	
Payment Plan		<input checked="" 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

7-22-22

WILLIAM M. HORNER

1202 KYNLEE CV

BRYANT, AR 72022

FOR THE PAST SEVERAL WEEKS, OUR SPRINKLER SYSTEM HAS BEEN LEAKING WATER, I SHUT THE SYSTEM OFF AND THIS FIXED THE PROBLEM. I AM ASKING FOR SEWER CREDIT FOR LAST MONTH AND THIS MONTH,

William M. Horner
501-940-3429