

CITY OF BRYANT WATER AND WASTEWATER UTILITIES MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: _____

September 2023

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	Nicole Bailey			Customer Address	2412 Shadowcreek		
Date Leak Detected by AMI				Date Customer Notified			
Date Leak Started				Date Leak Repaired	9/23		
2 months	Amount of Bill:	*577.17		Usage:	317		
	Average Bill:	\$39.53		Three Month Average Usage:	20		
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:			
Amount of Adjustment to Sewer Bill:	*239.88			Adjusted Bill Amount:	*337.29		
Customer Name	Michelle Starke			Customer Address	100 Lakebrook		
Date Leak Detected by AMI				Date Customer Notified			
Date Leak Started				Date Leak Repaired	9/23		
2 months	Amount of Bill:	*345.18		Usage:	188		
	Average Bill:	\$39.53		Three Month Average Usage:	20		
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:			
Amount of Adjustment to Sewer Bill:	*128.16			Adjusted Bill Amount:	*217.02		
Customer Name	Nathan Frick			Customer Address	3610 Whirlwind		
Date Leak Detected by AMI				Date Customer Notified			
Date Leak Started				Date Leak Repaired	8/23		
2 months	Amount of Bill:	*357.22		Usage:	201		
	Average Bill:	N/A New Customer		Three Month Average Usage:	20		
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:			
Amount of Adjustment to Sewer Bill:	*139.42			Adjusted Bill Amount:	*217.80		
Customer Name	Zachary Brewer			Customer Address	1720 Hidden Creek		
Date Leak Detected by AMI				Date Customer Notified			
Date Leak Started				Date Leak Repaired	8/23		
1 month	Amount of Bill:	*537.65		Usage:	297		
	Average Bill:	\$57.51		Three Month Average Usage:	30		
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:			
Amount of Adjustment to Sewer Bill:	*231.21			Adjusted Bill Amount:	*306.44		
Customer Name	Mykel Lister			Customer Address	1815 Pleasant Pointe		
Date Leak Detected by AMI				Date Customer Notified			
Date Leak Started				Date Leak Repaired	9/23		
1 month	Amount of Bill:	*555.64		Usage:	307		
	Average Bill:	\$131.24		Three Month Average Usage:	71		
Adjustment Approved:	Yes	<input type="checkbox"/>	No	Approved By:			
Amount of Adjustment to Sewer Bill:	*204.38			Adjusted Bill Amount:	*351.26		

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: September 2023

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	Powerlift Foundation	Customer Address	1210 Oak Hill Rd
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/23
<u>2 months</u> Amount of Bill:	\$486.08	Usage:	263
Average Bill:	\$39.53	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$193.11	Adjusted Bill Amount:	\$292.97
Customer Name	Jackie Edlund	Customer Address	603 Bristol Dr
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/23
<u>1 month</u> Amount of Bill:	\$433.35	Usage:	239
Average Bill:	\$89.88	Three Month Average Usage:	52
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$161.94	Adjusted Bill Amount:	\$271.41
Customer Name	Malcolm Glover	Customer Address	2307 Mystic Pt
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	9/23
<u>3 months</u> Amount of Bill:	\$1607.55	Usage:	888
Average Bill:	\$210	Three Month Average Usage:	114
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$472.86	Adjusted Bill Amount:	\$1,134.69
Customer Name	Michael Spann	Customer Address	3516 Mick: Dr.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	8/23
<u>3 months</u> Amount of Bill:	\$535.77	Usage:	292
Average Bill:	\$98	Three Month Average Usage:	50
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$122.98	Adjusted Bill Amount:	\$412.79
Customer Name	Kenny Payton	Customer Address	1100 Hill Farm Rd
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	8/23
<u>1 month</u> Amount of Bill:	\$645.55	Usage:	357
Average Bill:	\$39.53	Three Month Average Usage:	420
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$291.84	Adjusted Bill Amount:	\$353.71

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9-20-23 Service Account No.: 102-02986-01
 Customer Name: Nicole Bailey Home Phone: _____
 Service Address: 2412 Shadowcreek Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/23

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>\$577.17</u>			Usage:		<u>317</u>	
		Average Bill:		<u>\$39.53</u>			Three Month Average Usage:		<u>20</u>	
		Adjustment Approved:		Yes <input type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:		<u>\$239.88</u>			Adjusted Bill Amount:		<u>\$337.29</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

9/20/2023

Nicole Bailey
2412 Shadowcreek Bryant AR 72022
501-533-5809

The toilet in my master bathroom inside parts were no longer sealing. So the water would come on every 10 minutes or so to refill the tank. We did not realize until we received the water bill for \$477. All the parts inside the toilet have been replaced and confirmed the water does not come on every 10 minutes.

~~W. Bailey~~

Acct # 102-02986-01

9-20-23

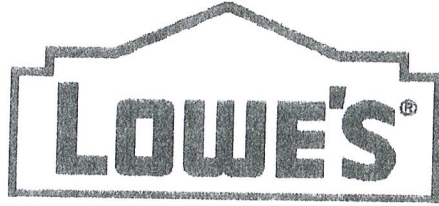
Leak Adjustment

2412

Shadow Creek

Acct #

102-02986-01



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

- SALE -

SALES#: FSTLAN04 828286 TRANS#: 518753155 09-12-23

1324296 PERMAX UNIVE HIQ PERF FI 14.98

SUBTOTAL: 14.98
TOTAL TAX: 1.48
INVOICE 72400 TOTAL: 16.46
VISA: 16.46

VISA: XXXXXXXXXXXX8974 AMOUNT: 16.46 AUTHCD: 604876
CHTP REFID: 247142400854 09/12/23 15:51:36
TVR : 8080088000
TSI : 6800 AID : A0000000980840

STORE: 2471 TERMINAL: 42 09/12/23 15:51:52
OF ITEMS PURCHASED: 1
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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* 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 #724006 247192 557698 *
* *
* 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: 42 09/12/23 15:51:52

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9.12.23 Service Account No.: 001-02255-17
 Customer Name: Michelle Starke Home Phone: _____
 Service Address: 100 Lakelook Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/12/23

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>345.18</u>			Usage:		<u>188</u>	
		Average Bill:		<u>39.53</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>128.16</u>			Adjusted Bill Amount:		<u>217.02</u>	
Payment Plan		Yes <input type="checkbox"/> No <input type="checkbox"/>		Payment Period		3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>		Payment Att: <input type="checkbox"/>		

[Signature]
Customer Service Manager

Greens at Hurricane Creek, a Limited Partnership

P O Box 13000
Fayetteville,AR 72703

Work Order No. 2224844

Date Call: 08/30/2023 01:20 PM

Status Work Completed

Date Completed: 09/12/2023 03:18 PM

Brief Desc: Very high water bill. Please come c

Job Site: 0114/03BR
100 Lakelook Drive
Bryant,AR 72022

Caller Name: Laura Phillips

Caller Phone: (870) 718-7507x

Occupant: Bethea (t0287077)

Office (870) 820-6180x

Home (870) 820-6180x

Priority: 3-General

Ok to enter? YES

Category: Plumbing

SubCategory: Other

Animal in Apt? Yes

Problem Description: Very high water bill. Please come check for leak.

Parts & Labor

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

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

Full Description Very high water bill. Please come check for leak.

Technician Notes: Replaced toilet handle that was keeping flapper from going all the way down making the toilet run continuously

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 001-01748-10
 Customer Name: Nathan Frick Home Phone: _____
 Service Address: 3610 Whirlwind Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 8.15

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>Smart</u>		Amount of Bill:	<u>\$357.22</u>			Usage:	<u>201</u>			
		Average Bill:	<u>N/A New Customer</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>\$139.42</u>			Adjusted Bill Amount:	<u>\$217.80</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"/>

Cary Stuard

Customer Service Manager

001-01748-10

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

Work Order No. 2184218
Date Call: 08/04/2023 09:10 PM

Status Work Completed

Date Completed: 08/05/2023 10:00 AM
Brief Desc: Toilet is continuously running,

Job Site: 0114/3610
3610 Whirlwind Street
Bryant,AR 72022

Caller Name: Nathan Frick

Caller Phone: (318) 805-8820x
Occupant: Frick (t0285604)

Priority: 3-General

Ok to enter? YES

Category: Plumbing

Animal in Apt? Yes

Home (318) 805-8820x

SubCategory: Toilet

Problem Description: Toilet is continuously running, tank is not refilling

Parts & Labor

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

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

Full Description Toilet is continuously running, tank is not refilling

Technician Notes: Replaced red seal and fill valve

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 102-06294-04
 Customer Name: Zachary Brewer Home Phone: _____
 Service Address: 1780 Hidden Creek Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 8-8-23

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

Hose Bib was cracked

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:	<u>\$537.65</u>				Usage:	<u>291</u>			
	Average Bill:	<u>\$57.51</u>				Three Month Average Usage:	<u>30</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				Approved By:	_____			
	Amount of Adjustment to Sewer Bill:	<u>\$231.21</u>				Adjusted Bill Amount:	<u>\$306.44</u>			
	Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment	_____		

Customer Service Manager

Acct # 102-06294-04
501-425-1709

280202

CUSTOMER'S ORDER NO.		DEPARTMENT	DATE			
		PRAYER Plumbing	8-8-23			
NAME Zachary Brewer						
ADDRESS 1720 Hidden Creek Dr.						
CITY, STATE, ZIP Bryant Arkansas 72022						
SOLD BY	CASH	C.O.D.	CHARGE	ON. ACCT.	MDSE. RETD.	PAID OUT

QUANTITY	DESCRIPTION	PRICE	AMOUNT
1	Hose bib was		
2	cracked leaking		
3	Replaced Hose bib		
4	in Backyard		
5			
6			
7			
8			
9			
10			
11			
12	Time + Material		500
13			PAID
14	Tech Joshua		
15	Brewer		
16			
17			
18			

RECEIVED BY 501-285-9892

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 001-01109-06
 Customer Name: Mykel Lister Home Phone: _____
 Service Address: 1815 Pleasant Pointe Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/11/23

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

Toilets Leaking

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

Sworn Statement:

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

Signature _____

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FOR OFFICE USE ONLY							
<u>1 month</u>	Amount of Bill:	<u>555.64</u>			Usage:	<u>307</u>	
	Average Bill:	<u>131.24</u>			Three Month Average Usage:	<u>71</u>	
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:		
	Amount of Adjustment to Sewer Bill:	<u>204.38</u>			Adjusted Bill Amount:	<u>351.26</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

1815 Pleasant Pkwy

001-01109-06

had to replace
both toilets.

Mykel Lister



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

- SALE -

SALES#: FSTLAN02 3550751 TRANS#: 010051014 09-16-23

5226197 3 INCH KIT WITH PERFORMAX	31.98
2743140 PS DNVIL RD CH WH 1.26(11)	139.00
202922 5/8-5-1/2-6 DE PT PICKET	13.50
6 @	2.25

SUBTOTAL:	184.48
TOTAL TAX:	18.22
INVOICE 79825 TOTAL:	202.70
DEBITMC:	202.70
CHANGE:	0.00

DEBITMC: XXXXXXXXXXXX4967 AMOUNT: 202.70 AUTHCD: 101579
CHIP REFID: 247141825366 09/16/23 11:17:15
*PIN VERIFIED

TRACE : 825366 RETRIEVAL: 247141825366
PURCHASE CASH BACK TOTAL DEBIT
202.70 0.00 202.70

TUR : 8000048000

TSI : 6800 AID : A0000000042209

STORE: 2471 TERMINAL: 41 09/16/23 11:17:22
OF ITEMS PURCHASED: 8
EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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

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YOUR ID #798254 247122 591455



LOWE'S HOME CENTERS, LLC
2390 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLAN02 2208501 TRANS#: 882717247 09-17-23

5626373 FM 2 IN EVERYTHING REPAIR	26.98
5193343 021 2P2 SET COCKTAIL TUMB	6.17
SUBTOTAL: 33.15	
TOTAL TAX: 3.27	
INVOICE 83417 TOTAL:	36.42
DEBITHC:	36.42
CHANGE:	0.00

AMOUNT: 36.42 AUTHCD: 120346

DATE: 09/17/23 17:04:46

AFTER VERIFIED

TRANSACTION ID: 847138417265

PURCHASE LASH BACK TOTAL DEBIT

36.42 0.00 36.42

TUR: 8000048000

TSC: 58004100



LOWE'S HOME CENTERS, LLC
2390 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -

SALES#: FSTLAN02 4835446 TRANS#: 730448646 09-17-23

280585 097 120000 8 8-1/2 IN SPARE	5.99
701551 001 2 1/2 3-1/2 IN SPARE	4.99
433883 001 1 1/2 2-1/2 IN SPARE	3.99
501129 001 1 1/2 2-1/2 IN SPARE	3.99

SUBTOTAL: 16.13	
TOTAL TAX: 1.59	
INVOICE 82475 TOTAL:	17.72
DEBITHC:	17.72
CHANGE:	0.00

AMOUNT: 17.72 AUTHCD: 120346
DATE: 09/17/23 17:04:46
AFTER VERIFIED
TRANSACTION ID: 847138417265
PURCHASE LASH BACK TOTAL DEBIT
17.72 0.00 17.72
TUR: 8000048000
TSC: 58004100

STORE: 2471 TERMINAL: 41 09/16/23 17:04:46
OF ITEMS PURCHASED: 4

EXCLUDES FEES, SERVICES AND SPECIALS

LOWE'S HOME CENTERS, LLC
2390 NORTH REYNOLDS ROAD
BRYANT, AR 72022 (501) 213-2000

- SALE -
SALES#: FSTLAN02 4835446 TRANS#: 730448646 09-17-23

280585 097 120000 8 8-1/2 IN SPARE	5.99
701551 001 2 1/2 3-1/2 IN SPARE	4.99
433883 001 1 1/2 2-1/2 IN SPARE	3.99
501129 001 1 1/2 2-1/2 IN SPARE	3.99

SUBTOTAL: 16.13	
TOTAL TAX: 1.59	
INVOICE 82475 TOTAL:	17.72
DEBITHC:	17.72
CHANGE:	0.00

AMOUNT: 17.72 AUTHCD: 120346
DATE: 09/17/23 17:04:46
AFTER VERIFIED
TRANSACTION ID: 847138417265
PURCHASE LASH BACK TOTAL DEBIT
17.72 0.00 17.72
TUR: 8000048000
TSC: 58004100

STORE: 2471 TERMINAL: 41 09/16/23 17:04:46
OF ITEMS PURCHASED: 4
EXCLUDES FEES, SERVICES AND SPECIALS

DEBITHC: XXXXXXXXXXXXXXXX AMOUNT: 17.72
CHIP REFID: 247141623866 09/17/23
*PIN VERIFIED
TABLE: 825366 RETRIEVAL: 247141623866
PURCHASE LASH BACK TOTAL DEBIT
202.70 0.00 202.70
TUR: 8000048000
TSC: 6800 AID: A000000004



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SHARE YOUR FEEDBACK
ENTER FOR A CHANCE TO WIN
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
TSC: 58004100

PLEASE PRINT NAME & ADDRESS
NAME: [REDACTED]
ADDRESS: [REDACTED]
CITY: [REDACTED] STATE: [REDACTED] ZIP: [REDACTED]
PHONE: [REDACTED]
E-MAIL: [REDACTED]
I D #834179 247102 602350
NO PURCHASE NECESSARY TO ENTER OR WIN.
ODDS VARY BY PURCHASE. MUST BE 18 OR OLDER TO ENTER.
www.lowes.com/survey
09/17/23

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 001-06966-04
 Customer Name: Powerlift Foundation Home Phone: _____
 Service Address: 1210 Oak Hill Rd. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/23

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

Toilet Leaking

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

Sworn Statement:

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

Signature _____

- You have the right to appeal the Customer Service Manager's decision to the Water and Sewer Advisory Committee (WSAC).
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FOR OFFICE USE ONLY										
2 months		Amount of Bill:	486.08			Usage:	263			
		Average Bill:	39.53			Three Month Average Usage:	20			
		Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Approved By:				
		Amount of Adjustment to Sewer Bill:	193.11			Adjusted Bill Amount:		292.97		
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

Tax - 501-445-3410

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

Work Order No. 2230633
Date Call: 09/06/2023 03:11 PM

Acct# 001-069666-04

Status Work Completed

Date Completed: 09/06/2023 04:44 PM
Brief Desc: leak in bathroom and toilet running

Job Site: 0178/1210-O
1210 Oak Hill Rd
Bryant, AR 72022

Caller Name: stevie williams

Caller Phone: (501) 399-9352x
Occupant: Munday (t0058422)
Office: (580) 436-7978x
Home: (501) 425-1125x

Priority: 3-General
Ok to enter? YES
Category: Other
Animal In Apt? No

SubCategory: Other

Problem Description: leak in bathroom and toilet running

Parts & Labor

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

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

Full Description: leak in bathroom and toilet running

Technician Notes: Replaced tub cartridge and fill valve

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 001-00474-01
 Customer Name: Jackie Edlund Home Phone: _____
 Service Address: 603 Bristol Dr Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 9/23

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 OFFICIAL USE ONLY											
1 month		Amount of Bill:			433.35			Usage:		239	
		Average Bill:			89.88			Three Month Average Usage:		52	
		Adjustment Approved:			Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:			161.94			Adjusted Bill Amount:			271.41
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 _____

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

001-00474-01
208-819-0671

- SALE -

SALES#: S2471DUK 4159697 TRANS#: 86848121 09-04-23

24408 FM REPLACMENT FILL VALVE	8.98
1314770 2 IN UNIVERSAL FLUSH VALV	15.98
1739422 HF BB COMBO SGL KNB MARVO	36.98

SUBTOTAL:	61.94
TAX:	6.12
INVOICE 01040 TOTAL:	68.06
M/C:	68.06

M/C:XXXXXXXXXX8719 AMOUNT:68.06 AUTHCD:004532

CHIP REFID:247101272452 09/04/23 12:21:54

APL: MASTERCARD TVR: 8000008000

AID: A0000000041010 TSI: 6800

STORE: 2471 TERMINAL: 01 09/04/23 12:22:23

OF ITEMS PURCHASED: 3

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: MARK MEYER

LOVE'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 # 010404 247152 472617

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: 01 09/04/23 12:22:23

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/12/23 Service Account No.: 101-06962-00
 Customer Name: Malcolm Glover Home Phone: _____
 Service Address: 2307 Mystic Pt Work Phone: _____
 City: Bryant State, Zip: AR 72092
 Date Leak Detected: _____ Date Repaired: 9/23

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

Toilets Leaking
 Regulator Bad

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:		1607.55		Usage:		888	
		Average Bill:		210		Three Month Average Usage:		114	
		Adjustment Approved:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Approved By:			
		Amount of Adjustment to Sewer Bill:		472.86		Adjusted Bill Amount:		1134.69	
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



waterbilling] Adjustment to Water Bill - 2307 Mystic Point, Bryant Arkansas 72022

Message:

Malcolm Glover <malcolmglover1@gmail.com>
o: waterbilling@cityofbryant.com

Tue, Sep 12, 2023 at 10:47 AM

Malcolm Glover
2307 Mystic Point
Bryant, Arkansas 72022
Phone: 501-213-7788

Bryant Water Billing Officials:

My name is Malcolm Glover and I live at 2307 Mystic Point in Bryant. As a resident, I am seeking an adjustment/reimbursement to recent water bills due to a faulty regulator in the front yard that had to be replaced and malfunctioning and leaking valves in the home.

Attached is an invoice from All Drains Plumbing from September 11, 2023. I have paid the high costs of all bills over the last few months, any adjustments/reimbursements that can be made for all that I have paid would be greatly appreciated.

Please email me or contact me by phone (501-213-7788), if you have additional questions.

Sincerely,
Malcolm Glover

 **All Drains Plumbing Receipt 9-11-2023.pdf**
322K

amantha Hawkins <shawkins@cityofbryant.com>
o: Malcolm Glover <malcolmglover1@gmail.com>
c: waterbilling@cityofbryant.com


Tue, Sep 12, 2023 at 10:48 AM

Thank you, someone will contact you after the adjustment is made.





Samantha Hawkins

Water Department, Billing Office Assistant
City of Bryant

 501-943-0441

 shawkins@cityofbryant.com

 www.cityofbryant.com

 210 SW 3rd St, Bryant, AR 72022

Attachments:

101-06962-00
501-213-7788

INVOICE NO.

805171

Invoice

SOLD TO Malcolm Glover	SHIPPED TO All Pawns Plumbing	VIA
ADDRESS 2307 Mystic pt	ADDRESS	
CITY, STATE, ZIP Bryant, Ar 72022	CITY, STATE, ZIP Bryant Ar	
CUSTOMER ORDER NO.	SOLD BY	DATE 9-11-23

Replaced regulator in the front yard. Pressure was 110 psi and is now 65 psi.

Replaced both fill valves and flappers in both toilets in the house that were malfunctioning and leaking.

Total - \$800
paid

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 9/23 Service Account No.: 101-06853-01
 Customer Name: Michael Spann Home Phone: _____
 Service Address: 3516 Vicki Dr Work Phone: _____
 City: Bryant State, Zip: AR 72072
 Date Leak Detected: _____ Date Repaired: 8/23

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

Hydrant leak - Rebuilt the stem

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:	535.77			Usage:	292		
		Average Bill:	98			Three Month Average Usage:	50		
		Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			Approved By:			
		Amount of Adjustment to Sewer Bill:	122.98			Adjusted Bill Amount:	412.79		
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 _____

INVOICE

501-213-5285
101-06853-01
Have Samantha
call



GC Plumbing Inc
5 Sheraton Dr
Little Rock, AR 72209

gcplumbinginc@gmail.com
+1 (501) 413-0140
www.gcplumbinginc.com

Andrea Elliott

Bill to
Black Rock Realty
3516 Vickie Dr
Bryant, AR 72022

Ship to
Black Rock Realty
3516 Vickie Dr
Bryant, AR 72022

Invoice details

Invoice no.: 4467
Terms: Net 30
Invoice date: 08/29/2023

Product or service	Amount
1. Service Call 2 men service call	1 unit × \$180.00 \$180.00
2. Parts	\$10.00
Total	\$190.00

Ways to pay



Contact GC Plumbing Inc to pay.

Note to customer

Alex & Westley repaired an outside hydrant leak, by rebuilding the stem.

Pay invoice

CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST

Date of Request: 8/23 Service Account No.: 001-07260-02
 Customer Name: Kenny Payton Home Phone: _____
 Service Address: 1100 Hill Farm Rd Work Phone: _____
 City: Bryant State, Zip: AR 72072
 Date Leak Detected: _____ Date Repaired: 8/23

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 OFFICIAL USE ONLY									
<u>1 month</u>	Amount of Bill:	<u>645.55</u>			Usage:	<u>357</u>			
	Average Bill:	<u>39.53</u>			Three Month Average Usage:	<u>220</u>			
	Adjustment Approved:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		Approved By:				
	Amount of Adjustment to Sewer Bill:	<u>291.84</u>			Adjusted Bill Amount:	<u>353.71</u>			
	Payment Plan	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt:		

[Signature]
Customer Service Manager

Next bill

WBC Construction

344 Turtle Creek Rd

Benton, AR 72015

501-317-5766



501-574-1215

Acct# 001-07260-02

Invoice

Bill to:		
Kenneth W. Payton	Date	1-Aug-23
1100 Hill Farm Road		
Hanger #45		
Bryant		

Description	Amount
Locate water leak, Cut asphalt, repair leak, fill and compact, pave and feather new asphalt	
TOTAL COST	\$1,500.00

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Comments:
This price reflects all material, labor, land fill fees, equipment rental, insurance, taxes, profit and overhead.