

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: _____

April 2024

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	Ora Allen	Customer Address	408 Mills Park
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$382.31	Usage:	198
Average Bill:	\$108.48	Three Month Average Usage:	50
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$130.75	Adjusted Bill Amount:	\$251.56
Customer Name	Joseph Lewellen	Customer Address	6802 Larry Ln
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1/2024
Amount of Bill:	\$944.17	Usage:	860
Average Bill:	\$35.29	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$454.44	Adjusted Bill Amount:	\$489.73
Customer Name	Brin Griggs	Customer Address	512 Monion Way
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$1,141.84	Usage:	612
Average Bill:	\$63.08	Three Month Average Usage:	24
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$519.49	Adjusted Bill Amount:	\$622.35
Customer Name	Steve Littleton	Customer Address	2620 Leslie Ln
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1/2024
Amount of Bill:	\$985.34	Usage:	1302
Average Bill:	\$26.47	Three Month Average Usage:	28
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$436.35	Adjusted Bill Amount:	\$548.99
Customer Name	Amelia Self	Customer Address	505 Boswell Rd.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	1-29-24
Amount of Bill:	\$574.95	Usage:	303
Average Bill:	\$97.94	Three Month Average Usage:	43
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$229.71	Adjusted Bill Amount:	\$345.24

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: April 2024

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	C. Roseberry DBA Autark Door	Customer Address	3013 Corporate Center
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$1,021.93	Usage:	545
Average Bill:	\$58.74	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$463.83	Adjusted Bill Amount:	\$558.10
Customer Name	Janice Rogers	Customer Address	2103 Sable Oaks Ct
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$643.65	Usage:	852
Average Bill:	\$17.45	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$284.96	Adjusted Bill Amount:	\$358.69
Customer Name	Peggy Goss	Customer Address	2819 Arbors Cr.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$340.11	Usage:	175
Average Bill:	\$108.95	Three Month Average Usage:	49
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$111.31	Adjusted Bill Amount:	\$228.80
Customer Name	Christopher Baltz	Customer Address	805 Shobe
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$1,813.33	Usage:	978
Average Bill:	\$86.93	Three Month Average Usage:	37
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$831.37	Adjusted Bill Amount:	\$2644.70
Customer Name	Michael Kiliagwa	Customer Address	906 Merion Way
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	3/2024
Amount of Bill:	\$870.32	Usage:	464
Average Bill:	\$55.74	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$392.27	Adjusted Bill Amount:	\$478.05

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/2024 Service Account No.: 001-00017-06
 Customer Name: Ora Allen Home Phone: _____
 Service Address: 408 Mills Park Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/2024

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.

Amount of Bill:	<u>\$382.31</u>	Usage:	<u>198</u>
Average Bill:	<u>\$108.48</u>	Three Month Average Usage:	<u>50</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>\$130.75</u>	Adjusted Bill Amount:	<u>\$251.56</u>
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
		Paymer's Amt:	

Customer Service Manager

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/2024 Service Account No.: 003-09558-03
 Customer Name: Joseph Lewellen Home Phone: _____
 Service Address: 6802 Larry Ln. Work Phone: _____
 City: Alexander State, Zip: AR 72002
 Date Leak Detected: _____ Date Repaired: 1/2024

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

Water line underground feeding to the house leaking.

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

Sewer only

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.

Amount of Bill:	\$944.17	Usager:	860
Average Bill:	\$35.29	Three Month Average Usager:	20
Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$454.44	Adjusted Bill Amount:	\$489.73
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
Payment Amt:		Payment Amt:	

Customer Service Manager

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/2024
 Customer Name: Brin Griggs
 Service Address: 512 Merion Way
 City: Bryant
 Date Leak Detected: _____
 Service Account No.: 001-04554-12
 Home Phone: _____
 Work Phone: _____
 State, Zip: AR 72022
 Date Repaired: 3/2024

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.

Amount of Bill:	<u>\$1,141.84</u>	Usage:	<u>612</u>
Average Bill:	<u>\$63.08</u>	Three Month Average Usage:	<u>24</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>\$519.49</u>	Adjusted Bill Amount:	<u>\$622.35</u>
Payment Plan:	<input type="checkbox"/> Yes <input type="checkbox"/> No	Payment Period:	<input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months
		Payment Amt.:	

Customer Service Manager

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

Work Order No. 2480208
Date Call: 03/07/2024 03:17 PM

Status Work Completed

Date Completed: 03/07/2024 04:12 PM
Brief Desc: Toilet will just run and run and ru

Job Site: 0178/0512-MW
512 Merion Way
Bryant,AR 72022

Caller Name: Brin Griggs

Caller Phone: (501) 672-0059x
Occupant: Welch (t0283829)

Priority: 3-General
Ok to enter? YES
Category: Plumbing
Animal in Apt? Yes

Home (501) 408-0770x

Other 1 (501) 408-0770x
SubCategory: Toilet

Problem Description: Toilet will just run and run and run after we flush for a long time then eventually will stop.

Parts & Labor

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

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

Full Description Toilet will just run and run and run after we flush for a long time then eventually will stop.

Technician Notes: Replaced float and flapper

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/2024 Service Account No.: 102-04343-00
 Customer Name: Steve Littleton Home Phone: _____
 Service Address: 2620 Leslie Lane Work Phone: _____
 City: Alexander State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1/2024

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

Busted Water Line
Leaking faucets
Water Heater Leaking

Water Only

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

Sworn Statement:

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

Signature _____

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

Amount of Bill:	<u>985.34</u>	Usage:	<u>1302</u>
Average Bill:	<u>26.47</u>	Three Month Average Usage:	<u>28</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>436.35</u>	Adjusted Bill Amount:	<u>548.99</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 _____

To: City of Bryant Water Department

March 5, 2024

From: Steve & Karen Littleton
2620 Leslie Lane
Alexander, AR 72002

Subject: Request for Water Usage Adjustment

To Whom it May Concern:

In January, we had a week of below freezing temperatures and after the temperature started warming up, we had 3 days of hard rain. Our back yard had standing water all over it. My wife and I detected (by hearing in our front bathroom) that it sounded like water running. I started looking for signs of leaking water throughout the house, my shop, and all around the outside of the house, shop, and pool house. I checked for two to 3 days, due to still hearing the sound we heard. When it finally quit raining the night of the 23rd, the next morning I went out to check outside again, since the rain had quit and the water standing in the yard had receded, I found where the main water supply had broken. This was a 3/4" pvc pipe that supplied water to my pool house. It broke right before the valve, which was inside a valve box about 18" below the surface. It had not given us any problem for the past 8 years when it was installed. I immediately shut the main cutoff down and called a plumber (bill attached).

Karen and I would appreciate any relief you can provide us on the bill of \$985.34

Thank you,



Steve Littleton
2620 Leslie Lane
Alexander, AR 72002

501-584-0127
501-831-0722

INVOICE NO.

734407

Invoice

SOLD TO

Steve Littleton

SHIPPED TO

Spain Thornton

ADDRESS

2620 Leslie Ln

ADDRESS

CITY, STATE, ZIP

Alexander, Ar 72002

CITY, STATE, ZIP

Benton, Ar

CUSTOMER ORDER NO.

SOLD BY

TERMS

F.O.B.

DATE

1-24-24

Repaired busted water line			
supplying the pool house			
in the backyard.			
Source - broken Sharkbite fitting			
Solution - solid brass PEX adapter.			
Total - 275			

To: City of Bryant Water Department

March 21, 2024

From: Steve & Karen Littleton
2620 Leslie Drive
Alexander, AR 72002

Subject: 2nd Request for Water Usage Adjustment

To Whom it May Concern:

On March 5, 2024, we submitted a request letter (letter attached) for a water bill adjustment due to a broken line. I was contacted by the Bryant Water Department that by their meter, we still had a small leak. With that information, I contacted my plumber to come back and recheck. He found a small dripping faucet and replaced the faucets. He also found a leak on the water heater, in which he replaced the water heater 3-19-24. After replacing the water heater, he then detected no other leaks. The plumber's invoices are attached for the work performed.

So now I am, again requesting for a relief on our bill of \$985.34. If you have any questions or may have any comments, please feel free to contact us.

Thank you,

Steve Littleton
(501) 584-0127
steve.sglconsulting@gmail.com

SOLD TO: Steve Littleton
 ADDRESS: 2620 Leslie Ln
 CITY, STATE, ZIP: Alexander, Ar
 ORDER NO.:
 SOLD BY:
 TERMS:
 F.O.B.:
 DATE: 3-11-24
 SERVICE TO: Thurman's Rooter Service
 ORDER NO.:
 CITY, STATE, ZIP: Benton, Ar

QTY	SIZE	UNITS	DESCRIPTION	PRICE	AMT	TAXES
			Replaced leaking faucets in the master bathroom that were dripping			
			Total - \$200			

270222
 SOLD TO: Steve Littleton
 ADDRESS: 2620 Leslie Lane
 CITY, STATE, ZIP: Alexander, Ar
 ORDER NO.:
 SOLD BY:
 TERMS:
 F.O.B.:
 DATE: 3-19-24
 SERVICE TO: TRS
 ORDER NO.:
 CITY, STATE, ZIP: Benton, Ar

CUSTOMER ORDER NO.: CK# 3414

QTY	SIZE	UNITS	DESCRIPTION	PRICE	AMT	TAXES
			Replaced leaking water heater in the garage and added new supply lines. No other leaks detected on the property.			
			Total - \$1300			

**CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST**

Date of Request: 3/20/24 Service Account No.: 001-05054-06
 Customer Name: Amelia Self Home Phone: _____
 Service Address: 505 Boswell Rd Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 1-29-24

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

Broken Pipe under the house for ice maker line.

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

Sworn Statement:

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

Signature _____

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

Amount of Bill:	<u>574.95</u>	Usager:	<u>303</u>
Average Bill:	<u>97.94</u>	Three Month Average Usager:	<u>43</u>
Adjustment Approved:	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>229.71</u>	Adjusted Bill Amount:	<u>345.24</u>
Payment Plan:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period:	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
Customer Service Manager		Payment Amt:	

Customer Service Manager

Amelia Self

501-539-6595

001-05054-06

172471

Invoice

SOLD TO Celia Braggitt		SHIPPED TO Advanced Plumbing Repairs		DATE MAR 5 1977
ADDRESS 305 Darnell Rd		ADDRESS 20302 B2		
CITY, STATE, ZIP Bryant AR		CITY, STATE, ZIP Benton AR 72018		
CUSTOMER ORDER NO.	SOLD BY	TERMS	F.O.B.	DATE 1-29-77

	Repair a broken pipe under the house for ice maker line - capped it off			
		hr @ \$120	\$120 ⁰⁰	
		Total	\$120 ⁰⁰	

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/20/24 Service Account No.: 001-08720-00
 Customer Name: C. Roseberry DBA Auton! Home Phone: _____
 Service Address: 3013 Corporate Center Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/20/24

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*

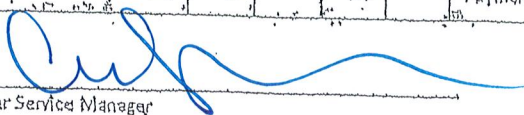
Sworn Statement:

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

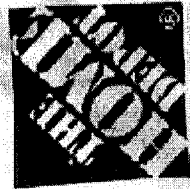
Signature _____

- 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.

Amount of Bill:	<u>1021.93</u>	Usage:	<u>545</u>
Average Bill:	<u>58.74</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>463.83</u>	Adjusted Bill Amount:	<u>558.10</u>
Payment Plan	Yes <input type="checkbox"/> No <input type="checkbox"/>	Payment Period	3 Months <input type="checkbox"/> 6 Months <input type="checkbox"/>
Customer Service Manager		Payment Amt.	



This number always in they fail in job



**How doers
get more done.**

r Dept.
t.

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

1405 00061 43861 03/05/24 11:34 AM
SALE SELF CHECKOUT

039961014771 400ARHRKP10 <A>
PERFORMAX COMPLETE TOILET REPAIR KIT
2020.98 41.96

SUBTOTAL 41.96
SALES TAX 3.93
TOTAL \$45.89

XXXXXXXXXXXX9689 HOME DEPOT
USD\$ 45.89 TA

AUTH CODE 005413/2611096
Chip Read THD P/C CRC
AID A0000000049999D8400304

PRO XTRA MEMBER STATEMENT

PRO XTRA ###-###-2443 SUMMARY

\$500.75

XTRA SPEND XTRA SPEND 03/04;

JNT INFO

Notice Date

3/1/2024

001 08720 00
001 08720 00

Bryant, AR 72202
(401) 943-0141



C. Roseberry dba Automatic Door
3013 CORPORATE CENTER
BRYANT, AR 72202

Account Number	Amount Due
001-08720-00	\$1,118.93
Due Date	Disconnect Date
3/10/2024	3/13/2024
Service Address	
3013 Corporate Center Dr	

Please return this portion with your payment.
When paying in person, please bring this coupon to the staff.
There will be a charge for an returned check.

City of Bryant Water/Sewer Dept
214 Southwood Blvd
Bryant, AR 72202

CUSTOMER ACCOUNT INFORMATION - RETAIN FOR YOUR RECORDS

Name	Service Address	Account Number	
C. Roseberry dba Automatic Door	3013 Corporate Center Dr	001-08720-00	
Notice Date	Due Date	Disconnect Date	Amount Due
3/1/2024	3/10/2024	3/13/2024	\$1,118.93

LATE NOTICE

We have not received payment for this current bill. Your prompt payment **ON OR BEFORE** the "Due Date" of this notice would be appreciated.

Failure to pay the "Amount Due" promptly will result in your utility services being terminated **WITHOUT FURTHER NOTICE**. Reconnection will require **CASH ONLY** payment of the Amount Due plus a reconnection charge.

Call the Utility Billing Office if you feel this notice is in error.

If payment has been made, please disregard this notice.

On 3-5-24, I replaced both toilets with new kits for inside the tanks. I have been talking with Angela in the water dept concerning this extremely high bill. I at one time had my plumbers journeyman live in Oklahoma.

-Cecily Roseberry-

**CITY OF BRYANT WATER AND WASTEWATER UTILITIES
LEAK ADJUSTMENT REQUEST**

Date of Request: 3/2024 Service Account No.: 101-10167-01
 Customer Name: Janice Rogers Home Phone: _____
 Service Address: 2103 Sable Oaks Ct Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/2024

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

RPZ Leaking

Explanation of how leak was repaired: irrigation meter
 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.

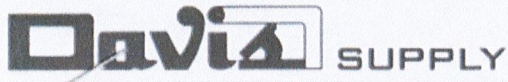
Signature _____

- 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.

Amount of Bill				\$ <u>643.65</u>				Usage:		<u>852</u>	
Average Bill				\$ <u>17.45</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>284.96</u>				Adjusted Bill Amount		\$ <u>358.69</u>	
Payment Plan		Yes <input type="checkbox"/>		No <input type="checkbox"/>		Payment Period		<input type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months		Payment Amt.	

Customer Service Manager: [Signature]

Janice M. Rogers 101-10167-01
501-416-0668



0014588762-001

DAVIS SUPPLY - LITTLE ROCK
6600 INTERSTATE 30
LITTLE ROCK, AR 72209
FAX: (501)-314-0433
Phone: (501)-314-0003

COD DELIVERY TICKET

Account: H006181 0001
Branch: DAVLROC
Phone: (501)-766-9301
Fax:

Ship To: JT LANDSCAPING
4803 GUM SPRINGS RD
LITTLE ROCK, AR 72209

Page 1 of 1

ITEM	DESCRIPTION	REM	SHPD	B/O	UOM	PRICE	UOM	AMOUNT
WLK975XL007	3/4" WILKINS 975 REDUCED PRESSURE ASSY 3/4" 1/EA Loc:PR02E04 Supp#: 34-975XL	1	1	0	EA	297.4684	EA	297.47
	Subtotal							297.47
	Sales Tax 8.625%							25.66
	TOTAL							323.13
	Payment Tendered 03/14/24 VISA							323.13
	Balance Due							00

Jose's lawn Service
→ Live Estimate 501-523-3411 501-213-9229
Call to fix Backflow valve

Irrigation Repairs
Landscape Installation
Drain Installation

Seasonal Clean up
Hardscaping
Mulching

RECEIPT No. 678207

DATE: 3/14/24

FROM: Janice Rogers \$ 500.00

2103 Sable Oaks Cir. Five hundred 00/100 DOLLARS

FOR RENT FOR Replace RPZ parts & labor

ACCT: FROM: TO:

PAID: 500.00 CASH CHECK MONEY ORDER CREDIT CARD

DUE: BY: [Signature]

A-2501 T-46820

COD Instructions	
Total:	.00
Collect:	.00

Date Delv: _____ Checked By: _____ Loaded By: _____ Truck No: _____ Weight: 13.00
Rec'd By: _____ Driver: _____ Load: 1.00
Printed: 03/14/24 11:37:59

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/20/24 Service Account No.: 001-06189-02
 Customer Name: Peggy Goss Home Phone: _____
 Service Address: 2819 Arbores CR Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/20/24

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

Service Line Leaking

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

Sworn Statement:

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

Signature _____

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

Amount of Bill:	<u>\$340.11</u>	Usager:	<u>175</u>
Average Bill:	<u>\$108.95</u>	Three Month Average Usager:	<u>4.9</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>\$111.31</u>	Adjusted Bill Amount:	<u>\$228.80</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 _____



7502 Peach Blossom Ave
 BENTON, AR. 72019
 Complete Plumbing Repairs
 MP5916

001-06189-02
 LITTLE ROCK BENTON
 501-515-9700 501-574-1300
 accurate.plumbing@yahoo.com
 24 HR EMERGENCY SERVICE

JOB INVOICE
 004272

BILL TO	PEGGY GOSS	DATE ORDERED	03-13-24	<input type="checkbox"/> A.M. <input checked="" type="checkbox"/> P.M.
ADDRESS	2819 ARBORES CIR	DATE PROMISED		
CITY	BRYANT, AR. 72022	PHONE		
JOB NAME AND LOCATION	EMERGENCY WATER LEAK	MECHANIC	ERNE	
DESCRIPTION OF WORK	HAND DIGGING TO ACCESS/LOCATE WATER LEAK BY MAIN WATER METER BUT ON 1" WATER SERVICE LINE BLUE PEX SERVICE PIPE COMPRESSION FITTING BROCKEN. FIXED.	PLUMBER	BASTIAN	
		<input checked="" type="checkbox"/> DAY WORK		
		<input type="checkbox"/> CONTRACT		
		<input checked="" type="checkbox"/> EXTRA		

QUANT.	DESCRIPTION OF MATERIAL USED	PRICE	AMOUNT
2	1" CRIMP PEX COUPLINGS		
31	1" PEX BLUE SERVICE PIPE		
4	1" CRIMP PEX COPPER RING		
COMPLETED			
(3) THREE YEARS WARRANTY			

HOURS	LABOR	AMOUNT
3.5	MECHANICS ERNE	
1.5	HELPERS BASTIAN	
	EQUIPMENT	
	TOTAL LABOR	
	TOTAL MATERIALS	
	TOTAL LABOR	
	TAX	
	TOTAL	\$425.00

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

SIGNATURE

DATE COMPLETED
 03/13/24

RECEIVED PMT
 [Signature]
 PAID CHECK

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/20/24 Service Account No.: 102-03920-02
 Customer Name: Christopher Baltz Home Phone: _____
 Service Address: 805 Shobe Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/20/24

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

Leak by Regulator Box.
Shankbite Coupling Rotted out.

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.

Amount of Bill		*1813.33		Usage		978	
Average Bill		*86.93		Three Month Average Usage		37	
Adjustment Approved		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Approved By:			
Amount of Adjustment to Sewer Bill		*831.37		Adjusted Bill Amount		*2644.70	
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:

ARROW PLUMBING

Tankless Water Heaters • Rooter & Drain Cleaning • Water & Sewer Lines • Toilet Repair
Sinks & Garbage Disposals • Leak Detection • Hydro Jetting • Rerooping Services • Gas Line Repair
Video Sewer Inspections • House Plumbing Inspections • Trenchless Solutions

501-753-3838

ARROW PLUMBING.NET

4007 MacArthur Drive, North Little Rock, AR 72118

License # WFB3792

Service Exp Brandon Invoice #: **84407**

DATE: MOVED 10/24 JOB #: PS 2187

CUSTOMER NAME: Allen Jenkins CALLER NAME: _____ JOB CONTACT NAME: _____
 JOB ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____
 BILLING PARTY ADDRESS (if different): 805 Shobe Rd Bryant PH: _____

Arrow Total Care Club Member? Yes No Renewal Date: / /

ORIGINAL REASON FOR CALL: High water bill
 SUMMARY OF FINDINGS/RECOMMENDED WORK: Performed leak locate
Found leak by regular box. Dug up to
find shutoff. Coupling rolled out. Made
proper repair.
All tested good!

CUSTOMER AWARENESS REVIEWED
 Safety and Efficiency Checklist Yes No
 Total Care Club Membership Plan Yes No
 Warranty/Safety stickers Yes No
 & Valve Tags Installed Yes No
 Homeowner's Value Packet Yes No
 Yard Sign Contest Yes No
 5 Star Customer Service Survey Yes No

WORK AUTHORIZATION: I, the undersigned, is the owner/authorized representative/tenant of the premises at which the above work is being done. I hereby authorize you to perform the above recommendation, and to use such labor and materials as you deem advisable. I understand that Arrow Plumbing will not provide an itemized breakdown of materials & labor beyond the price set forth below. Unless prior authorization for billing is made in advance, payment for all work done is due upon completion (COD). An office billing charge and/or finance charge of 1.75% per month (21% per annum) or a minimum of \$30.00 per month will be added after 3 days past due. I agree to pay reasonable attorneys' fees, court costs and collection fees in the event of legal action. I have read this contract, including the terms and conditions on the reverse side hereof and agree to be bound by all the terms contained herein. All old parts will be removed from premises and discarded, unless otherwise specified herein.

I HEREBY AUTHORIZE YOU TO PROCEED WITH THE ABOVE WORK AT THE UPFRONT FEE OF: \$ 569.00 Signature: [Signature] Print Name: Allen Jenkins
 I HEREBY AUTHORIZE THE ADDITIONAL WORK/CHANGE ORDER TO INVOICE AT THE UPFRONT FEE OF: \$ 1163.00 Signature: [Signature] Print Name: Allen Jenkins

Qty	Task #	Description	Investment	Warranty
	Dispatch Fee	(Ask me how you can receive FREE dispatch fees!)		
		Leak locate	75.00	90 days
		Hand dig/Repair	494.00	parts/labor
			594.00	

FINANCING TERMS: pd m/c

PAYMENT 1 GF Cash Check Check # _____
 MC Visa AmEx Auth. # _____

PAYMENT 2 GF Cash Check Check # _____
 MC Visa AmEx Auth. # _____

SUBTOTAL	
TAX	
TOTAL COST	<u>1163.00</u>
TOTAL MEMBERSHIP SAVINGS \$	

ACCEPTANCE OF WORK PERFORMED: I acknowledge satisfactory completion of the above described work and that the premises have been left in satisfactory condition. I understand that if my check does not clear, I am liable for the check and any charges from the bank. I agree to pay 1.75% per month for past due amounts (minimum charge \$30). In the event that collection efforts are initiated against me, I shall pay for all associated fees at the posted rates as well as all attorneys' fees and collection costs. I agree that the amount set forth in the space marked "TOTAL COST" is the total flat price I have agreed to pay.

SIGNATURE: [Signature]

CUSTOMER SERVICE IS OUR #1 PRIORITY
 We are committed to providing you with the highest level of customer service. If you are not completely satisfied for any reason or you need us to do anything better at any point in the process, please let me or my manager know as soon as you can. Your feedback is very important to us.

THANK YOU FOR CHOOSING US FOR YOUR SERVICE NEEDS!

I decline to have recommended repairs:
 SIGNATURE _____

Christopher Baltz 501-574-8996 102-03920-02

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 3/2024 Service Account No.: 001-04538-06
 Customer Name: Michael Ikiliagwu Home Phone: _____
 Service Address: 906 Merion Way Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 3/2024

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

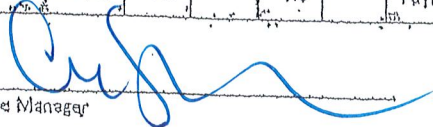
Sworn Statement:

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.

Amount of Bill:	<u>\$870.32</u>	Usage:	<u>464</u>
Average Bill:	<u>\$55.74</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>\$392.27</u>	Adjusted Bill Amount:	<u>\$478.05</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:	

Customer Service Manager: 

HS 10:46 am

Fax: 501-943-3410

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

Work Order No. 2488626
Date Call: 03/19/2024 04:38 PM

Status Work Completed

Date Completed: 03/19/2024 04:58 PM
Brief Desc: Water bill \$870. Suspected water le

Job Site: 0178/0906-MW
906 Merion Way
Bryant, AR 72022

Caller Name: Michael Ikiliagwu

Caller Phone: (501) 213-7729x
Occupant: Ikiliagwu (t0055100)

Home (501) 213-7729x

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

SubCategory: Other

Problem Description: Water bill \$870. Suspected water leak.

001-04538-06

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 Water bill \$870. Suspected water leak.

Technician Notes: Faulty fill valve, replaced it and the flapper, working properly now