

CITY OF BRYANT WATER AND WASTEWATER UTILITIES MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: May 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	Camille Marshall	Customer Address	511 South St Unit #1
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	371.29	Usage:	192
Average Bill:	125.46	Three Month Average Usage:	58
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	118.38	Adjusted Bill Amount:	252.91
Customer Name	Guqueta David	Customer Address	2509 Hummer Garden
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	1256.62	Usage:	1146
Average Bill:	38.29	Three Month Average Usage:	20
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	609.16	Adjusted Bill Amount:	647.46
Customer Name	James Bell	Customer Address	512 Hayden Creek
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	951.33	Usage:	503
Average Bill:	115.40	Three Month Average Usage:	49
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	401.10	Adjusted Bill Amount:	550.23
Customer Name	Kaylee Turnbaugh	Customer Address	111 N. Vike St
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	426.33	Usage:	222
Average Bill:	59.40	Three Month Average Usage:	22
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	176.70	Adjusted Bill Amount:	249.63
Customer Name	Alexandra Wilson	Customer Address	8003 N. Haven P.
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	480.81	Usage:	413
Average Bill:	62.77	Three Month Average Usage:	26
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	209.36	Adjusted Bill Amount:	271.45

CITY OF BRYANT WATER AND WASTEWATER UTILITIES

MONTHLY LEAK ADJUSTMENT REPORT

SUMMARY

Date: May 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	Andrew Jeffers	Customer Address	205 Summerfields
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:	\$885.79	Usage:	458
Average Bill:	\$144.60 w/ spkth-	Three Month Average Usage:	54
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$356.93	Adjusted Bill Amount:	\$528.86
Customer Name	Willie McIntosh	Customer Address	4721 Lexington
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	5/24
Amount of Bill:	\$450.19	Usage:	235
Average Bill:	\$88.76	Three Month Average Usage:	38
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$174.04	Adjusted Bill Amount:	\$276.15
Customer Name	Tavarus McIntosh	Customer Address	713 Elkhardt Ln
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:	\$635.48	Usage:	336
Average Bill:	\$59.40	Three Month Average Usage:	22
Adjustment Approved:	Yes <input type="checkbox"/> No <input type="checkbox"/>	Approved By:	
Amount of Adjustment to Sewer Bill:	\$277.41	Adjusted Bill Amount:	\$358.07
Customer Name	Monica Pritchett	Customer Address	2310 Mystic Pt
Date Leak Detected by AMI		Date Customer Notified	
Date Leak Started		Date Leak Repaired	
Amount of Bill:	\$288.74	Usage:	147
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:	\$112.19	Adjusted Bill Amount:	\$176.55
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: 5/20/24 Service Account No.: 101-09121.01
 Customer Name: Camille Marshall Home Phone: _____
 Service Address: 511 South St. Unit 10 Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: _____

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

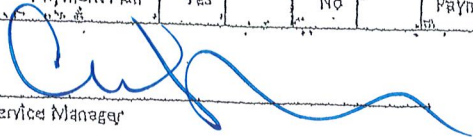
Sworn Statement:

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>371.29</u>	Usage:	<u>192</u>
Average Bill:	<u>125.46</u>	Three Month Average Usage:	<u>58</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>118.38</u>	Adjusted Bill Amount:	<u>252.91</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.	



101-09121-01

May 11, 2024

To: Bryant Water

From: Rick Johnson, Owner/Manager

Re: 511 South St. #1 – Camille Marshall high water bill

On April 30th tenant Camille Marshall notified us that she had an unusually high-water bill and may have a leak.

On May 2nd I checked all the plumbing and found that the hall bath toilet was leaking inside the tank. I replaced the toilet seal and adjusted the float, and it is working properly now. We went ahead and replaced the seal of the master bath toilet as well. No other leaks were found.

I provided Camille Marshall with a receipt for the plumbing parts. No labor was charged since I did the work myself.

I also noticed she had very high-water pressure in the toilets and showers compared to the adjacent properties. I turned down the pressure to the toilets and we will be having a plumber check the outside regulator.

If you have any questions call me or email.

Thank you,



Rick Johnson, Owner/Manager

501-247-7991

info@rentbryant.com



LEARN MORE AT LUMES.COM/MYLDWLSREWARDS

LUMES CENTERS, LLC
2330 S. REYNOLDS ROAD
BRYANT, AR 72022 (501) 713-2000

- SALE -

SALTS# : ESTAN04 4385677 TRAN# . 857255018 05-01-24

247025 RB MANSFIELD FLUSH VALVE	10.34
10.88 DISCOUNT EACH	-0.54
247076 RB MANSFIELD FLUSH VALVE	4.56
2.40 DISCOUNT EACH	-0.12
2 0	2.28

SUBTOTAL:	14.90
TOTAL TAX:	1.47
INVOICE 70016 TOTAL:	16.37
LBA:	16.37

TOTAL SAVINGS THIS TRIP: \$0.78

LBA: XXXXXXXXXXXXXXXX1748 AMOUNT: 16.37 AUTHCD: 000612

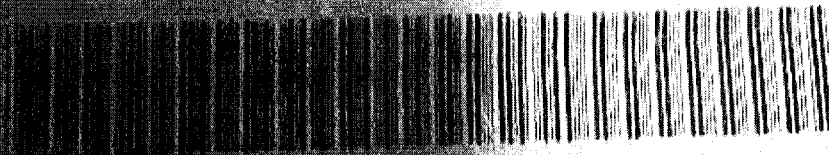
SUTPED REFTD:700160 05/01/24 12:48:53

LBA/PO: 511 South #1

STORE: 2471 TERMINAL: 42 05/01/24 12:49:18

OF ITEMS PURCHASED: 3

EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 5/20/24 Service Account No.: 003-10068-01
 Customer Name: Guigneta David Home Phone: _____
 Service Address: 2509 Hurricane Blvd Work Phone: _____
 City: Benton State, Zip: AR 72019
 Date Leak Detected: _____ Date Repaired: 5/11/24

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

Sprinkler froze and Busted

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>7256.62</u>	Usager:	<u>1146</u>
Average Bill:	<u>*38.29</u>	Three Month Average Usager:	<u><20</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>*609.16</u>	Adjusted Bill Amount:	<u><647.46</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

003-10068-01

501-902-9297




Invoice 193

[Hide invoice](#)


May 11, 2024

Bill to

 Guqueta David

 (501) 902-9297

Ship to

 2509 Hurricane Gardens Dr Bryant, AR, 72019-7063

Terms

Same day

Due date

May 11, 2024

[Download Invoice PDF](#)

Description / Qty / Rate

Amount

Sprinkler

\$150.00

1 x \$150.00

Sprinkler repairr

Subtotal

\$150.00

TAX 0%

\$0.00

Shipping

\$0.00

Total

\$150.00

Paid

\$150.00

Balance Due

\$0.00

Comments

Philippians 4:13- We can do all things through Christ Jesus who strengthens us

During the freeze earlier this year my sprinkler head that was covered with a insulated bag froze and busted. The sprinkler head has been repaired. NO water was leaked into the sewer.

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 5.12.24 Service Account No.: 101-09277-01
 Customer Name: James Bell Home Phone: _____
 Service Address: 512 Hayden Creek Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: _____

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>\$951.33</u>	Usage:	<u>503</u>
Average Bill:	<u>\$115.40</u>	Three Month Average Usage:	<u>49</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	_____
Amount of Adjustment to Sewer Bill:	<u>\$401.10</u>	Adjusted Bill Amount:	<u>\$550.23</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 _____

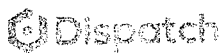
101-09277-01 - House

Quantity	Price	Total
1	\$0.00	\$0.00

Service Charge

Arrived on job to look for a water leak. Checked sprinkler meter and water meter in yard and found no issues there. Checked both toilets inside home and found the toilet in the hallway bathroom was running so I replaced the seal inside the toilet tank to stop water from leaking. Tested multiple times by flushing toilet. Found toilet to be sealed and issue fixed.

Subtotal	\$0.00
Tax	\$0.00
Total	\$0.00



AFFORDABLE
Rooter Service

Superior Quality Service at an Affordable Price

From **Affordable Rooter Service, LLC.**
400 NW 4th St
Bryant, AR 72022
help@affordablerooterservice.com
+15016203324

Job ID # 87184805
Invoice # 83615
Issue date Mar 13, 2024
Work start date Mar 13, 2024
Job Address 112 Hayden Creek Dr. Bryant AR 72022

Invoice for **James Bell**
512 Hayden Creek Dr
Bryant, AR 72022

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 5/20/24 Service Account No.: 001-03376-01
 Customer Name: Kaylee Turnbough Home Phone: _____
 Service Address: 111 N. Vihar St Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5/24

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

water spicket leaking

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

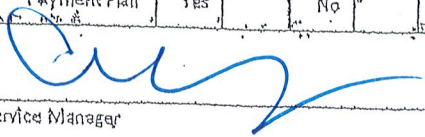
Sworn Statement:

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>\$426.33</u>	Usager:	<u>222</u>
Average Bill:	<u>\$59.40</u>	Three Month Average Usager:	<u>22</u>
Adjustment Approved:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill:	<u>\$176.70</u>	Adjusted Bill Amount:	<u>\$249.63</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

3094251

Joe Turris 5/10/2024
Haylee Turnbough
111 N Vine
Bryant, AR

SOLD BY	CASH	CHECK	CREDIT CARD	ON ACCT.	MOSE RETURN	PAID OUT
	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
QUAN.	DESCRIPTION			PRICE	AMOUNT	

Water leak
& water spout

LABOR - 2 hrs	15.00	150.00
PARTS	60.00	60.00

paid
cash

210

RECEIVED BY

Haylee Turnbough
111 N Vine St

001-03376-01

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 5/24
 Customer Name: Alexandra Wilson
 Service Address: 8003 N. Howard
 City: Alexander
 Date Leak Detected: _____
 Service Account No.: 003-08607-00
 Home Phone: _____
 Work Phone: _____
 State, Zip: AR 72002
 Date Repaired: 5/24

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

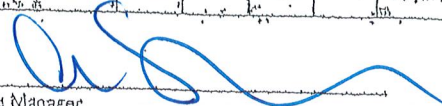
Sworn Statement:

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>480.81</u>	Usage	<u>413</u>
Average Bill	<u>62.07</u>	Three Month Average Usage	<u>26</u>
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	<u>209.36</u>	Adjusted Bill Amount	<u>271.45</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 

Acct#
003-08607-00

To Whom It May Concern,

I am a Master Plumber with license number #MP6275 in the state of Arkansas.

I have corrected the issue with both toilets by replacing the fill valves in both toilets.

Please, give me a call; if any other info is needed.

Sincerely,

Master Plumber

(501) 563-8902

Tuesday, May 7, 2024

David M. Murrell

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

Date of Request: 5/24 Service Account No.: 001-02449-02
 Customer Name: Andrea Jeffers Home Phone: _____
 Service Address: 205 Sumner Fields Work Phone: _____
 City: Bryant State, Zip: AR 72028
 Date Leak Detected: _____ Date Repaired: 4/24

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

Busted Service Line to house

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

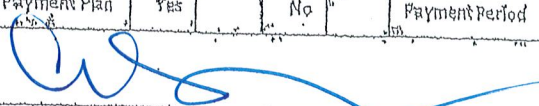
Sworn Statement:

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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Amount of Bill	<u>885.79</u>	Usage	<u>458</u>
Average Bill	<u>144.60</u>	Three Month Average Usage	<u>54</u>
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved By:	
Amount of Adjustment to Sewer Bill	<u>356.93</u>	Adjusted Bill Amount	<u>528.86</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.	

Customer Service Manager 

DRAIN RIGHT PLUMBING LLC
 P.O. BOX 2008 · BENTON, AR 72018-2008
 501-317-1730 501-249-9497

SERVICE INVOICE

MP 6760
 drainright6760@gmail.com

Date of Order: March 27th

Customer's Order No.	Phone	Mechanic	Helper	Date
Bill To: <u>Andrea Jeffers</u>				Order Taken By
Address: <u>205 Summerfield</u>				<input type="checkbox"/> Day Work
City: <u>Bryant</u>				<input type="checkbox"/> Contract
Job Name and Location				<input type="checkbox"/> Extra
Work Ordered By		Job Phone		

DESCRIPTION OF WORK

Dig up & repair busted water service to the house

	TOTAL MATERIALS	
	TOTAL LABOR	
	TAX	
<input type="checkbox"/> No One Home	Date Completed	TOTAL AMOUNTS <u>450.00</u>

Signature: [Handwritten 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: 5/24 Service Account No.: 101-05107-00
 Customer Name: Willie McIntosh Home Phone: _____
 Service Address: 4721 Lexington Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: 5/24

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

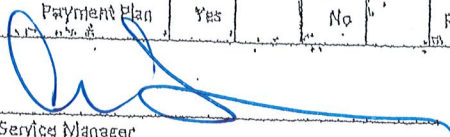
Sworn Statement:

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Signature _____

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Amount of Bill		<u>450.19</u>		Usager		<u>235</u>	
Average Bill		<u>88.76</u>		Three Month Average Usager		<u>38</u>	
Adjustment Approved		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		Approved By:		_____	
Amount of Adjustment to Sewer Bill		<u>174.04</u>		Adjusted Bill Amount		<u>276.15</u>	
Payment Plan	Yes	No	Payment Period	3 Months	6 Months	Payment Amt.	


Customer Service Manager



How doers
get more done.

11 MABELVALE PLAZA LANE
LITTLE ROCK, AR 72205 (501) 565-7168

8919 00051 45461 05/20/24 02:55 PM
SALE SELF CHECKOUT

049057104064 FLAPPER <A> 6.98
KORKY ULTRA WATER SAVER FLAPPER

SUBTOTAL 6.98
SALES TAX 0.60
TOTAL \$7.58

XXXXXXXXXXXX7598 HOME DEPOT USD\$ 7.58

AUTH CODE 020749/6513088 TA

Chip Read
AID A0000000049999D8400303 THD PLCC CON

PRO XTRA MEMBER STATEMENT

PRO XTRA ###-###-1345 SUMMARY

2024 PRO XTRA SPEND 05/19: \$411.14
INCLUDES:
2024 PROXTRA SAVINGS 05/19: \$22.71

As of 05/20/2024 your Paint Rewards level is Member; Spend 956.75 more in qualifying paint purchases to earn Bronze (10.0% off) on select paint items.

Get the CREDIT LINE your business needs PLUS earn Perks 4X FASTER when you join Pro Xtra, register, & use your Pro Xtra Credit Card. Apply and SAVE UP TO \$100. Learn more at homedepot.com/credit

8919 05/20/24 02:55 PM



8919 51 45461 05/20/2024 7638

RETURN POLICY DEFINITIONS
POLICY ID DAYS POLICY EXPIRES ON
A 11 365 05/20/2025

DID WE NAIL IT?

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

Opine en español

www.homedepot.com/survey

User ID: H8B 100130 91262
PASSWORD: 24270 91211

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

101-05107-00

501-653-0690

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 6/24 Service Account No.: 001-00601-11
 Customer Name: Tavarus McIntosh Home Phone: _____
 Service Address: 713 Elkhart Ln. Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Data Repaired: _____

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>\$635.48</u>	Usage	<u>336</u>
Average Bill	<u>\$59.40</u>	Three Month Average Usage	<u>22</u>
Adjustment Approved	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Approved by:	_____
Amount of Adjustment to Sewer Bill	<u>\$277.41</u>	Adjusted Bill Amount	<u>\$358.07</u>
Payment Plan	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Payment Period	<input checked="" type="checkbox"/> 3 Months <input type="checkbox"/> 6 Months
_____		Payment Amt.	_____

Customer Service Manager [Signature]

April 4th-10th
the plug in the back of my toilet
was unsealed so I sealed it by
Supergluing it together to fix the
problem

TAVARUS

713 Elkhart loop

901-346-8449

001-00601-11

CITY OF BRYANT WATER AND WASTEWATER UTILITIES LEAK ADJUSTMENT REQUEST

Date of Request: 5/24 Service Account No.: 101-06436-01
 Customer Name: Monica Pritchett Home Phone: _____
 Service Address: 2310 Mystic Pt Work Phone: _____
 City: Bryant State, Zip: AR 72022
 Date Leak Detected: _____ Date Repaired: _____

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

Toilet Leaking
Leaking Faucet

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							
Amount of Bill	<u>288.74</u>			Usage	<u>147</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>112.19</u>			Adjusted Bill Amount	<u>176.55</u>		
Payment Plan	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Payment Period	<input type="checkbox"/> 3 Months	<input type="checkbox"/> 6 Months	Payment Amt.	_____

Customer Service Manager [Signature]



TMT Remodeling And More LLC

Business # 870-374-0094

870-374-0094

101-06436-01

INVOICE

Billed To

Monica Murry

101-06436-01

Billed From

TMT Remodeling And More LLC

101-06436-01

Invoice #: 101-06436-01

Date: July 22, 2024

Item	Price	Quantity	Total
Leaking Faucet Repair Labor, Basic Basic labor to repair leaking faucet with favorable site conditions. Shut off water supply to faucet. Adjust, repair seat washers, packing, cartridge as needed. Turn on water supply and verify leak-free operation. Includes up to \$20 in parts. Includes planning, equipment and material acquisition, area preparation and protection, setup and cleanup.	\$75.00	1	\$75.00
Remove And Replace Toilet Flush And Fill Valve	\$125.00	1	\$125.00

Subtotal \$200.00

Grand Total \$200.00

Paid \$200.00

Due \$0.00

Monica Murry

101-06436-01

870-718-1500

101-06436-01

870-718-1500



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

- SALE -

SALES#: FSTLAN01 3728526 TRANS#: 99941122 05-23-24

1914770 2 IN UNIVERSAL FLUSH VALV	16.98
SUBTOTAL:	16.98
TOTAL TAX:	1.68
INVOICE 83444 TOTAL:	18.66
DEBITVISA:	18.66
CHANGE:	0.00

DEBITVISA: XXXXXXXXXXXX7221 AMOUNT: 18.66 AUTHCD: 055218
 TAP REFID: 247141444983 05/23/24 19:20:14
 *PIN VERIFIED
 TRACE : 444983 RETRIEVAL: 247141444983
 PURCHASE CASH BACK TOTAL DEBIT
 18.66 0.00 18.66
 TVR : 0000000000
 AID : A0000000980840

STORE: 2471 TERMINAL: 41 05/23/24 19:20:30
 # OF ITEMS PURCHASED: 1
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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 * *



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

- SALE -

SALES#: FSTLAN03 4172658 TRANS#: 49329285 05-23-24

1324296 PERMAX UNIVE HIG PERF FI	15.98
5288074 PS WEBBER CENTERSET BR NI	29.98
SUBTOTAL:	45.96
TOTAL TAX:	4.54
INVOICE 83230 TOTAL:	50.50
DEBITVISA:	50.50
CHANGE:	0.00

DEBITVISA: XXXXXXXXXXXX7221 AMOUNT: 50.50 AUTHCD: 817909
 TAP REFID: 247138230967 05/23/24 17:55:54
 *PIN VERIFIED
 TRACE : 230967 RETRIEVAL: 247138230967
 PURCHASE CASH BACK TOTAL DEBIT
 50.50 0.00 50.50
 TVR : 0000000000
 AID : A0000000980840

STORE: 2471 TERMINAL: 38 05/23/24 17:56:07
 # OF ITEMS PURCHASED: 2
 EXCLUDES FEES, SERVICES AND SPECIAL ORDER ITEMS



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 * *