Revised

Cal. P.U.C. Sheet No.

10135-W

655 W. Broadway, Suite 1410 San Diego, CA 92101

LEAK ADJUSTMENT REQUEST - NEED RECEIPTS

Sheet 1

(See Attachment Form)

(N)

(Continued)

(TO BE INSERTED BY UTILITY) Advice 1349

Decision

ISSUED BY J. T. LINAM

Date Filed Effective

(TO BE INSERTED BY C.P.U.C.) 10/29/2021 10/29/2021

DIRECTOR - Rates & Regulatory

Resolution



Date

Customer Name Service Address

For Service To: Account Number: Service Address:

Dear California American Water Customer:

We're proud to provide our customers with high-quality, reliable service. Recently, you contacted us to let us know about a water leak at your property, and we were glad to hear that you were able to locate and repair the leak successfully.

Now, we'd like to see if you qualify for a courtesy leak adjustment, however, we'll need a few more details from you. Please complete the enclosed form and return it within 15 days of the date of this letter to the address provided. For details on how we treat the information you have provided to us on this form, and your privacy rights and how to exercise them including how to exercise a "do not sell" opt-out visit our website www.californiaamwater.com or contact us at 1-888-237-1333.

Once we receive your information, we will process the request within 30 business days. If your leak qualifies for a billing adjustment, we will apply a credit to your account. Generally, the adjustment is calculated based on a portion of the excess water used above what's normal for the property. If your leak does not qualify for an adjustment, we'll let you know in writing.

If your wastewater service is provided by another organization: If your wastewater bill is calculated based on your recorded water use with California American Water, please contact your wastewater service provider directly to discuss your request for an adjustment.

Again, thanks for finding and fixing the leak. We always like to hear about our customers' efforts to use water wisely and protect our natural resources. Plus, saving water saves money. Interested in more tips, tools and technologies that can help you conserve and save on your bill, visit us online at www.californiaamwater.com. If you have any questions, please contact our Customer Service Center, Monday through Friday, 7 a.m. to 7 p.m.

Sincerely,

California American Water Customer Service

LOSS OF WATER ADJUSTMENT REQUEST FORM

California American Water offers customers the opportunity to request a one-time billing adjustment due to leaks or other issues that reflect high usage. Please fill out the following form so that we can best address this request.

TODAYS DATE:			
REASON FOR REQUEST:	Leak	High Water Use/Cause Known	High Water Use/Cause Unknown
	Other (ple	ase explain in section below)	
BEST CONTACT TELEPHO	NE NUMBEI	R:	
DATE LEAK DISCOVERED			
DATE LEAK REPAIRED/CO	RRECTED		
PROVIDE DETAIL REASON	FOR REQU	JEST AND SPECIFIC ACTION TAKEN TO	REPAIR OR CORRECT THE ISSUE:
DID YOU ATTACH Proof (R	eceipt) of L	eak Repair? Attaching proof with form will	speed processing time.
-		submitted is true. I also understand su company has the right to limit adjustme	
This form should be complete	ed, printed, s	signed, and submitted to one of the following	ng:
Fax: (618) 433-4569 Emai	l: csc.corres	spondencebilling@amwater.com	
Mail: California American W	ater, Attentic	on: Leak Adjustment, PO Box 578, Alton, II	_ 62002
Please allow up to 20 days for	or processing	g.	
		on you have provided to us on this form, ar sell" opt-out visit our website www.californ	

Customer Service: M-F 7am to 7pm Emergency: 24/7: 1-888-237-1333 www.californiaamwater.com