



Charlotte County Utilities

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"To exceed expectations in the delivery of public services."

OWNER ADJUSTMENT REQUEST FORM

As a customer of Charlotte County Utilities, you may request a billing adjustment on your current bill in accordance with standard operating procedures. Only the Owner of the property, or their authorized agent can request an adjustment by completing this Owner Adjustment Request form. Your payment or arrangement must accompany this form, along with any necessary supporting documents must be received in the Utilities Department Business Services office for adjustment to be considered. Please be advised that you are responsible for any unpaid balance on your account. Submittal of this adjustment form does not prevent your account from further action in compliance with the Utilities Dept. Credit and Collections policy. **Return Item and Unauthorized Use Fees are not eligible for adjustment. Adjustments can only be made on Active Accounts. Adjustments will not be processed if there is a past due balance.**

Please Print or Type Below

I, _____ as Owner or Authorized Agent of the property located at:
(Your Name)

(Property Address) _____
(Account Number)

hereby authorize Charlotte County Utilities to review the aforementioned account for an adjustment.

Please circle the reason for the adjustment request:

- | | |
|--|--|
| <input type="checkbox"/> Leak | <input type="checkbox"/> Unexplained Use |
| <input type="checkbox"/> Initial Pool Fill | <input type="checkbox"/> Pool Repair |
| <input type="checkbox"/> Reconnection Fee (restricted to one a year) | <input type="checkbox"/> Unauthorized Use Fee (restricted to one lifetime when in Phase II or higher) otherwise, no adjustment allowed |
| <input type="checkbox"/> Premise Visit Fee | <input type="checkbox"/> Penalty Fees |
| <input type="checkbox"/> Meter Tampering (restricted to one a year) | <input type="checkbox"/> Return Check Fee (restricted to one lifetime) |

Owner's Name

Owner's Phone Number

Owner's Mailing Address

Owner's Cell Phone Number (Utilities authorized to use to contact)

Owner's Email Address

Authorized Agent's Phone Number

Authorized Agent's Fax Number

I am the Owner/Authorized agent for the property listed above. I am aware that there a maximum of two adjustments per calendar year and I am electing to use one of my adjustments for this purpose. I am aware that I am responsible for any unpaid balance on my account and that submittal of this form does not prevent my account from further collection action in compliance with Charlotte County's Credit and Collections Policy. I have read this document in its entirety and acknowledge this by my signature below.

Owner's/Authorized Agent's Signature

Date

Charlotte County Utilities has developed an Identity Theft Prevention Program mandated by the Federal Trade Commission's Red Flags Rule which implements Section 114 of the Fair and Accurate Credit Transactions Act of 2003. 16 C. F. R. § 681.2. Due to the implementation of the Identity Theft Prevention Program all account adjustment requests must be submitted in writing along with required evidence of identity of the property owner or an authorized agent thereof. Each account may not exceed the maximum number of annual adjustments.

For Office Use Only:

Adjustment Removal: 1st _____ 2nd _____

Date adjustment completed: _____

By: _____
Customer Service Representative