



REQUEST FOR UTILITY BILL REVIEW, ADJUSTMENT, OR TO PETITION THE UTILITY BILLING REVIEW COMMITTEE (UBRC)

Account Holder Name:
Service Street Address:
Phone Number:
Email Address:

Please provide the account number exactly as it appears at the top of your utility bill:	-
Please provide the date(s) of the utility bill(s) for review or adjustment: _____	
Please select the reason for review or adjustment:	
Repair of involuntary leak: Repair date required: _____. Documentation must include type & date of repair (i.e., plumber invoice, receipt/pictures of proof of supplies purchased/repair). New or repaired permitted swimming pool: Pool fill/refill date required: _____. Documentation must include type of repair and number of gallons used to fill/refill pool (i.e., plumber invoice, receipt/pictures of proof of supplies purchased/repair). Pools must be properly permitted pursuant to law. Flooded structure during a hurricane/flooding event (for pool related issues select #2 above): Damages must be recorded through FEMA (i.e., insurance claim documents). High bill in absence of a leak with a mechanical water meter: For mechanical water meters only. Documentation must include certification from a licensed plumber or leak detection company showing absence of leak of private property. Abnormal event (for leaks select #1 above): No documentation required. Utility Billing Review Committee (UBRC): Documentation must include written department decision. Provide reason for petition under <i>Additional Comments</i> below.	
Additional comments: _____ _____ _____	

By submitting this request, you affirm that all information on this application form is true and correct to the best of your knowledge.

SUBMISSION OPTIONS	MAIL TO: City of St. Petersburg Customer Service P.O. Box 33037 St. Petersburg, FL 33733-8037	IN-PERSON: City of St. Petersburg Municipal Services Center One 4th St. N. St. Petersburg, FL 33701
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Billing and Collections
stpete.org/utilities
One 4th St. N.
727-893-7341