

Plumber's statement

For customers who have had a concealed leak

If you have had a concealed water leak on your property, ask your licensed plumber to fill out this form.

We will review your bill if you give us a:

- copy of your plumber's invoice
- meter reading **after** your plumber repaired the leak.

We will not give an allowance if the:

- leak is visible
- leak is not repaired by a licensed plumber
- property is vacant
- leak is on a tap, toilet cistern, dishwasher or washing machine.

We will only give an allowance once every five years.

Customer details

| |
|------------------------------|
| Sydney Water account number: |
| Name: |
| Contact number: |

Plumber details

| | |
|-----------------|-----------------|
| Plumber's name: | |
| Business name: | |
| Contact number: | Licence number: |

Property details

| | |
|---|-------------------------------|
| Address where the leak occurred: | |
| Meter number: | |
| Meter reading after repairs (black numbers only): | Date read: ____ / ____ / ____ |

Leak details

| | |
|--|---|
| The date you contacted the plumber: ____ / ____ / ____ | The date the plumber fixed the leak: ____ / ____ / ____ |
| How was the leak discovered (damp ground, surface water, could hear water running etc)? | |
| Where was the leak? Above ground <input type="checkbox"/> Underground <input type="checkbox"/> | |
| The leak was: Visible <input type="checkbox"/> Concealed <input type="checkbox"/> | |
| Describe the leak (where it was and what caused it): | |
| Where did the water go? Ground <input type="checkbox"/> Sewer <input type="checkbox"/> Stormwater <input type="checkbox"/> Wall cavity <input type="checkbox"/> Other (explain) <input type="checkbox"/> | |

Declaration

I certify that this information is true and accurate.

Plumber's signature _____ Date: ____ / ____ / ____

Please email the completed form with your plumber's invoice to CaseManagementTeam@sydneywater.com.au. Alternatively, you can fax them to 9616 2434 or post a copy to:

Sydney Water
Case Management Team (Liverpool)
PO Box 399
PARRAMATTA NSW 2124