



MHOG Utilities

2911 Dorr Road
Brighton, MI 48116
800-881-4109
810-227-5225

For MHOG Use Only-Do not fill in.
Amount of Adjustment: \$ _____
Approved By: _____
Date of Adjustment: _____

Application for Adjustment of Water/Sewer Bill

Account No: _____

Full Name: _____
Last First

Property Address: _____
Street Address

_____ City State ZIP Code

Home Phone: () _____ Phone: Cell () _____

Property Owner & Phone (if different than resident) _____

Complete Section A and return with all requested documents and information, to our office. Mail to: MHOG Utilities, 2911 Dorr Road, Brighton, MI 48116, Attn: Billing Department. You will be notified by phone of any adjustments that were made or any other decision rendered by our office. This will be done as soon as applicable.

Section A

Describe Problem: Explain what happened, how you discovered the problem and the date problem occurred. (If additional space is needed, attach separate sheet.)

Corrective Action & Meter Read When Corrected: Meter Read _____ Date: _____

List what you did to repair the problem. Attach copies of repair bills, receipts for parts and supporting documentation.

In making this request, I understand that the MHOG Utility Department reserves the right to inspect any or all repairs.

Signature

Date