



Loss Protection Claim Form

Customer Name:	
Service Address:	
Phone Number:	
Account Number:	

Please provide a brief explanation of the leak source: _____

Leak was in the (check one)

- External Water Line
- Internal Water Line
- External Irrigation Line

(See Service Contract(s) for definitions of line types.)

Date leak was discovered: _____

Date of repair: _____

Leak was repaired by:

Name:	
Address:	
Phone:	

A copy of all receipts for the repair are required for processing.



Acknowledgement:

I certify that the information provided in this form is true, and that reimbursement for any eligible leak is subject to meeting the terms of the Service Contract Agreement. I also certify that I have authority to make a claim for this account.

Name: _____ Signature: _____

Please complete all of the information requested on the first page and above, **attach all receipts for the repair**, and submit to Piedmont Water Company by one of the following methods:

Mail: P.O. Box 80745
Atlanta, Georgia 30366

Fax: 404-235-4977

Email: customerservice@piedmontwater.com

For Office Use Only

Protection Plan: _____ Residential _____ Irrigation

Date of Enrollment in Protection Plan: _____

Average Bill: _____

Plus Overage Factor: _____ (\$200 for Residential, \$400 for Irrigation)

Total: _____

\$2500 – Total above: _____ (**Total Claim Amount**)

Date Amount Posted to Account: _____