

ORDINANCE # 03 - 2016

AN ORDINANCE OF THE TOWN OF ROACHDALE, INDIANA  
APPROVING A TOWN WATER AND WASTEWATER  
BILLING ADJUSTMENT POLICY

WHEREAS, at times factors such as pipe leaks, irrigation, and swimming pools require adjustments to water and wastewater bills from the utilities of the Town of Roachdale in the interest of fairness to customers, and

WHEREAS, the Town Council, as the Utility Service Board of those utilities, would like to establish a uniform written policy and procedure for those adjustments,

NOW THEREFORE, BE IT HEREBY ORDAINED BY THE TOWN COUNCIL OF THE TOWN OF ROACHDALE, PUTNAM COUNTY, INDIANA THAT:

Section 1. The attached water and wastewater billing adjustment policy is hereby adopted by and for the Town of Roachdale, Indiana, and its municipal utilities. This policy is hereby incorporated by reference into this Ordinance as if fully set forth herein. Further, the forms and procedures contained in this policy are to be used as described therein.

Section 2. (A) All other provisions of the Town Code not in conflict with this Ordinance shall remain in full force and effect.

(B) The subsequent invalidity of any section, clause, sentence, or provision of this Ordinance shall not affect the validity of any other part of this Ordinance which can be given effect without such invalid part or parts.

(C) This Ordinance shall be in full force and effect upon adoption.

(D) All Ordinances or parts of Ordinances in conflict herewith are hereby repealed concurrent with the applicable effective date set forth in this Ordinance.


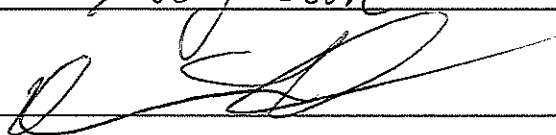
Adopted this 12 day of April, 2016.

ROACHDALE TOWN COUNCIL:

ATTEST:



Debbie Sillery, Clerk-Treasurer  
Town of Roachdale, Indiana

  
\_\_\_\_\_  
  
\_\_\_\_\_

dsp 4-12-16

# Town of Roachdale

## Wastewater Billing Adjustment

The purpose of this policy is to establish uniform Town procedures regarding adjustments to customers' monthly billing for sewer usage; to establish guidelines for application of adjustments to customers' monthly bills; to ensure that the use of billing adjustments is correctly authorized and applied; and to disconnect water service for non-payment of sewer bills.

### **Sewer Billings**

Ordinance 3-2015 provides for the sewer charges to be sent to the owner of the property. Charges shall be billed to the owner of each property served. Sewer charges may be billed to the tenant or tenants occupying the property served, only when requested in writing by the owner, but such billing shall in no way relieve the owner from the liability in the event payment is not made as herein required. The owner of properties served, which are occupied by a tenant or tenants, shall have the right to examine the collection records of the Town for the purpose of determining whether bills have been paid by such tenant or tenants, provided that such examination shall be made at the office at which said records are kept and during the hours that such office is open for business.

### **Sewer Bill Adjustments**

It is the Town's policy to provide the highest standard of service to our community in a customer friendly manner. The application of adjustments to customers' monthly billings provides assistance to those customers who may have experienced hidden plumbing problems or to those customers who own and fill a swimming pool. Utilizing an adjustment process supports the Town's efforts to provide high-quality, customer friendly service delivery to the public. For this reason, establishing guidelines should help preserve the benefits provided to our customers from billing adjustments.

As a property owner, you are responsible for maintaining the condition and integrity of your infrastructure. Visually checking for leaks, ensuring that your pipes are water tight, reviewing you bill monthly and knowing your average usage are some of the things you can do to help minimize the cost of your monthly bill and avoid expensive repairs.

Charges for wastewater treatment are assessed using water meter use readings. As these meters age, they tend to run slower, not faster, and usage may not be recorded accurately. In these instances, the consumer is undercharged, not overcharged.

Adjustments may be processed by the Town of Roachdale staff per the following criterion:

- Water leak adjustment which would not discharge into the wastewater treatment system;
- Town of Roachdale errors which would result in incorrect readings;
- Late charges improperly assessed due to errors, misapplied payments, adjustments, etc. or proration of bills in which ownership of property is transferred or initial connection; and
- Swimming Pools which are filled only after a Pool Adjustment Request Form is completed and returned to the Town Office.

Refunds may be granted only for overpayments. Any credit balances which arise from adjustments may only be used to reduce a customer's account balance. Credit balances may be used to apply against other accounts if the customer has more than one account.

### **Water Leak Adjustments**

The Town of Roachdale will adjust a sewer bill resulting from a leak which would not discharge into the sewer system.

1. Formal written application for a bill adjustment. This application form is available in the town office.
2. Proof of leak and the repair through receipts from a plumber or for parts. (This requirement may be waived if repairs are verifiable.)
3. Town of Roachdale employee(s) sent on location to confirm the location of the leak and verify that the water would not have gone through the sewer system and that the repairs were made and complete.

If an adjustment is deemed appropriate, the sewer portion of the bill will be reduced to the customer's previous 12 month average.

Excess water usage is defined as a 200% increase in usage over the customer's 12 month average usage.

Adjustments for water leaks are limited to one per customer per location, per 12 month period unless extenuating circumstances exist such as the water leak continues over two billing cycles. It is intended for this policy to apply to customers responding promptly to a "high" bill and that any plumbing problems are identified and repaired immediately.

## **Water Company Errors**

Any errors in billing arising from erroneous information submitted by the water company serving the customer's account will be corrected upon notification. If there is no valid data to support a charge, the customer's account will be charged based on the most recent twelve month average billing. Notification of errors should be made within 15 days of billing.

## **Adjustments and Prorated Billing**

Adjustments will be made to remove any penalties as a result of incorrect or erroneous billing for any customer which is current with their account. Any misapplied payments will be corrected immediately, once notified, and the resulting penalties reversed which occur as a result of the misapplication of payments only. Any further reduction of penalties must be submitted in writing to the Town Council for approval.

If an account is transferred or established during a single billing period, the amount will be prorated based on usage or a proration of the minimum bill.

## **Lawn/Landscaping Watering Adjustments**

### Metered Irrigation Systems

Exterior irrigation systems and other closed water systems which are documented as not entering the wastewater treatment system may be credited to the customer account provided the customer obtains and installs a separate water meter for documentation of usage. The Town of Roachdale will sell to any resident the best water meters at the best cost available. The customer will pay for the meter at the time purchase or they can elect to have the cost billed over the following six months. The customer will be responsible for all state sales tax as required.

The customer must register the meter with the Town Office AND pay a water meter deposit (per each meter) prior to installation by bringing the meter into the office and completing the attached agreement. Customers will be required to sign an affidavit which states the meters will be used for the purpose stated and consent to a wastewater employee inspecting to verify the system is functioning correctly and no water is returning through wastewater treatment.

Each of the meters on the metered irrigation system will be read on the first Monday in May and the last Friday in October.

## **Swimming Pools**

The chemicals used to maintain proper pH, alkalinity, and disinfection in swimming pools are not to be discharged to the surface waters or into storm water drains.

In specific cases where the customer can demonstrate that there is no discharge of swimming pool water to the sanitary sewer system and the water is properly treated to neutralize all chemicals prior to discharge, the customer may request a credit of sewer charges once per calendar year by calculating the quantity of water required to fill the pool. Customers requesting a credit for water to fill the pool will be required to complete the Pool Adjustment form with signed affidavit and consent for on-site inspection PRIOR TO filling the pool. Customers will be documenting their pool size, the fact the water discharged is not entering the wastewater treatment system and they are properly pre-treating the water prior to discharge.

The Town of Roachdale will **NOT** make adjustments for the following:

- Routine and/or occasionally dripping faucets, unattended systems left running, running commodes/toilets or any other faulty customer plumbing;
- Premises left or abandoned or vacated without reasonable care for the plumbing system;
- More than one occurrence per any 12 month period;
- Bills claimed to be lost or not received;
- Homes under construction or major renovation. If water is used during construction, the contractor should document that the water does not discharge into the sewer system via a separate meter;
- Failure to provide proof of repair; or
- Requests for adjustments more than 15 days after the billing date.

Town of Roachdale

**Property Owner Request for Direct Utility Billing to Tenant(s)**

The undersigned hereby acknowledges that he/she is the property owner of the following address: \_\_\_\_\_.

He/she hereby requests, pursuant to Ordinance 3-2015, the Town of Roachdale, to bill the tenant or tenants occupying said property. He/she further acknowledges that such billing of the tenant or tenants shall in no way relieve the owner from liability in the event payment is not made as required. Such billing shall continue until he/she makes a written request to discontinue the same. He/she, as the property owner, shall have the right to examine the collection records of the Town of Roachdale for the purposes of determining whether the bills have been paid by such tenant or tenants. The property owner also affirms that the lease/rental agreement between the property owner and the tenant requires that the tenant is required to pay for any and all utility service as part of the lease/rental agreement.

\_\_\_\_\_  
Signature of Property Owner

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
Daytime Telephone Number

Town of Roachdale  
**Request for Utility Billing Adjustment Credit**

Please fill out the following information completely and return to the Town Office.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Customer Account Number

\_\_\_\_\_  
Phone Number

Reason for Requesting Billing Adjustment:

- Clerical Billing Error
- Suspected Meter Malfunction
- Water Leak
- Swimming Pool
- Other \_\_\_\_\_

Have you ever received a previous billing adjustment?

NO

YES

If so, when: \_\_\_\_\_

For leaks, please complete a leak adjustment form or the no repair receipt/documentation form.

Are you a tenant at this property?

NO

YES

\_\_\_\_\_  
Landlord's Name

\_\_\_\_\_  
Landlord's Mailing Address

\_\_\_\_\_  
Landlord's Phone Number

We suggest you pay at least the amount of your average bill at this time, and pay the current amount for any future bills until the adjustment has been processed. The balance due after your leak adjustment will typically be higher than your usual bill amount.



**Town of Roachdale**  
**Request for Utility Billing Adjustment Credit**

Please fill out the following information completely and return to the Town Office.

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Customer Account Number Phone Number

Date you first noticed your leak: \_\_\_\_\_

Date the leak was repaired: \_\_\_\_\_

Where was the leak located:

Inside the House      Between House and Water Meter      In Irrigation System

Have you ever received a leak adjustment?    NO    YES    Date: \_\_\_\_\_

Have you attached a receipt/documentation for the leak repairs?    YES    NO

If No, please completed the No Repair Receipt/Documentation form enclosed with this application. Note, copies of receipts documenting the repair or a "No Repair Receipt/Documentation Form" MUST be returned with your completed application, or the application will be returned to you.

Are you a tenant at this property?

Have you ever received a leak adjustment?    NO    YES    Date: \_\_\_\_\_

Have you attached a receipt/documentation for the leak repairs?    YES    NO

If No, please completed the No Repair Receipt/Documentation form enclosed with this application. Note, copies of receipts documenting the repair or a "No Repair Receipt/Documentation Form" MUST be returned with your completed application, or the application will be returned to you.

Are you a tenant at this property?      YES      NO

Landlord's Name: \_\_\_\_\_

Landlord's Mailing Address: \_\_\_\_\_

Please describe how your leak was identified or provide any additional facts you think might be helpful. Additional pages may be attached as necessary.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

How much is your total water bill for the billing period of the leak: \_\_\_\_\_

We suggest you pay at least the amount of your average bill at this time, and pay the current amount for any future bills until the adjustment has been processed. The balance due after your leak adjustment will typically be higher than your usual bill amount.

By signing this request, I certify that I understand the terms and conditions in the Town of Roachdale Leak Adjustment Policy.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

Note: If you have not received a water bill through the date you leak was repaired, we will process your claim after your next bill. It takes an average of 30 days to process customer leak adjustment claims. Your patience during this process will be appreciated. Any penalties associated with the leak during this process will be waived. If you are unable to make the full amount immediately, you may call the Town Office at (765) 522-1532 to discuss payment options. Please call as soon as possible after you receive your bill.

Town of Roachdale  
**No Repair Receipt/Documentation Form**

Please fill out the following information completely and return to the Town Office.

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Customer Account Number Phone Number

Please explain where your water line broke (attach additional pages if necessary):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly describe the repair:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

If repair parts were used for this repair or a commercial establishment performed the repair why are receipts not available:

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

Town of Roachdale  
**Pool Adjustment Request Form**

Please fill out the following information completely and return to the Town Office.

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Customer Account Number

\_\_\_\_\_  
Phone Number

Requesting a Pool Adjustment:

- All information fields on form must be completed in order to determine eligibility and amount of your courtesy credit. Incomplete or illegible forms will be returned without being processed.
- This form **MUST BE** completed and returned **BEFORE** you begin filling your pool.
- You must call the town office three business days prior to when you begin filling your pool to state when you are going to start filling your pool. A representative from the town will be sent out on the day you begin filling the pool to read your water meter. They will then return once you are completed filling your pool and re-read your meter.
- Meter readings are only done 7:30 a.m. to 3:30 p.m. Monday through Friday. If you request a weekend fill/read/inspection a charge of \$75.00 applies. No reads/fills/inspections will be conducted on holidays.
- A visual inspection of the pool must be done by a representative of the town prior to starting filling the pool.
- Only the sewer portion of the bill will be adjusted
- Only one pool adjustment is allowed per calendar year.

\_\_\_\_\_  
Date to Start Pool Fill

\_\_\_\_\_  
Estimated End Date of Fill

Volume of Pool in Gallons: \_\_\_\_\_

Dimensions of pool:

Round Pool:

Diameter: \_\_\_\_\_ft      Depth: \_\_\_\_\_ft

Rectangular Pool:

Length: \_\_\_\_\_ft    Width: \_\_\_\_\_ft    Depth: \_\_\_\_\_ft

I affirm the above information to be factual and will follow all local, state, and federal laws required in the proper treatment and discharge of any water from the pool. In addition, I consent to an annual on site inspection of my pool by a representative for the Town of Roachdale.

\_\_\_\_\_  
Customer Signature

\_\_\_\_\_  
Date

Town of Roachdale  
**Irrigation Water Meter Form**

Please fill out the following information completely and return to the Town Office.

\_\_\_\_\_  
Name Date

\_\_\_\_\_  
Service Address

\_\_\_\_\_  
Customer Account Number Phone Number

Water Meter Number: \_\_\_\_\_

Meter Model: \_\_\_\_\_

Meter Size: \_\_\_\_\_

Beginning Meter Reading: \_\_\_\_\_

I affirm the meter registered with this form will be used to register water usage for exterior irrigation, landscaping and other watering systems which will not return any water through the Town of Roachdale wastewater treatment system. I consent to a representative of the Town of Roachdale entering my property, at a reasonable time, for inspection of such systems.

\_\_\_\_\_  
Customer Signature Date

STATE OF INDIANA )  
                                      ) SS  
PUTNAM COUNTY     )

TOWN OF ROACHDALE  
SEWER ADJUSTMENT FORM  
PETITIONER

THE UNDERSIGNED PETITIONER BEING DULY SWORN UPON HIS/HER OATH DEPOSES  
AND SAYS THAT A WATER LEAK EXISTED AT

\_\_\_\_\_ ON OR  
ABOUT THE \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_ AND THAT THE  
WATER FROM THIS LEAK DID NOT DISCHARGE INTO THE WASTEWATER TREATMENT  
SYSTEM OF THE TOWN OF ROACHDALE.

\_\_\_\_\_  
Petitioner Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name