

**VILLAGE OF HAMILTON  
MUNICIPAL UTILITIES COMMISSION**

**PO Box 119, 3 Broad Street  
Hamilton, New York 13346  
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Commissioners:  
John Basher, President  
Larry Baker  
Rob Gustafson  
Bob Holcomb  
Russ Lura

Village Administrator Sean Graham  
Village Treasurer Mary Ann Henderson  
Village Clerk Alana Scheckler

**MUC  
WATER LEAK POLICY**

**PURPOSE:**

The Village of Hamilton Municipal Utilities Commission (MUC) adopts this policy as guidelines for the investigation of customer side water leakage. It is intended to outline a procedure for both the customer and the Village in determining the cause of the leak. These procedures shall be the guidelines utilized by the MUC in determining customer refund, if any. Any refund granted shall be for the Sewer portion of the bill only. **No refund shall be considered for the Water portion of the bill.**

**POLICY LIMITS:**

These procedures shall apply to all residences and businesses presently served or any future service that may be served by the Village water supply.

**CUSTOMER PROCEDURE:**

Any customer requesting refund shall be required to make an appointment with the MUC's designated representative. The representative shall meet with the applicant at the property where the leak occurred. This information sheet shall be completed and signed by both the applicant and the MUC representative. It shall then be filed with the MUC at their regular monthly meeting for review and decision. Each situation shall be evaluated on a case by case basis. No refund will be given when negligence by the resident is clearly evident. The MUC shall render a decision no later than sixty days from date of filing.

**NAME & ADDRESS OF PROPERTY OWNER: (PRINT)** \_\_\_\_\_

**STREET:** \_\_\_\_\_

**CITY:** \_\_\_\_\_

**STATE:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**PHONE No.** \_\_\_\_\_

**FAX No.** \_\_\_\_\_

(IF THE PROPERTY ADDRESS IS DIFFERENT THAN THE OWNERS ADDRESS PLEASE COMPLETE THIS SECTION)

**STREET NAME & No:** \_\_\_\_\_

**P.O. BOX:** \_\_\_\_\_

**ZIP CODE:** \_\_\_\_\_

**IS THIS A RENTAL PROPERTY?:** \_\_\_\_\_ **NAME OF RENTER:** \_\_\_\_\_

**NAME OF PERSON RESPONSIBLE FOR UTILITY BILL:** \_\_\_\_\_

**DATE LEAK WAS DETECTED:** \_\_\_\_\_ **DATE LEAK WAS REPAIRED:** \_\_\_\_\_

**PERSON/COMPANY WHO REPAIRED LEAK:** \_\_\_\_\_

**SIZE OF PIPE LEAKING:** \_\_\_\_\_

**WAS THE RESIDENCE OCCUPIED?:** \_\_\_\_\_

**IF RENTAL PROPERTY, WAS THE TENANT ON VACATION?:** \_\_\_\_\_

**IS THE RESIDENCE SEASONAL?:** \_\_\_\_\_

**HOW OFTEN IS THE BUILDING CHECKED WHEN UNOCCUPIED?:** \_\_\_\_\_

**ESTIMATED TIME LEAK WENT UNDETECTED:** \_\_\_\_\_

**ESTIMATED WATER LOSS:** \_\_\_\_\_

**WHAT TYPE OF FLOOR DOES BASEMENT HAVE?:** \_\_\_\_\_

**IS THERE A DRAIN IN THE FLOOR?:** \_\_\_\_\_

**WHERE DOES THE FLOOR DRAIN DISCHARGE TO?:** \_\_\_\_\_

**IS THERE A SUMP PUMP IN THE BASEMENT?:** \_\_\_\_\_

**WHERE DOES THE SUMP PUMP DISCHARGE TO?:** \_\_\_\_\_

**WAS THERE ANY HEATING FAILURE?:** \_\_\_\_\_

**WHAT AMOUNT OF THE BILL IS THE CUSTOMER SEEKING RELIEF?:** \_\_\_\_\_

\_\_\_\_\_ **APPLICANT COMMENTS**

\_\_\_\_\_ **APPLICANT SIGNATURE** \_\_\_\_\_ **DATE**

\_\_\_\_\_ **REPRESENTATIVE COMMENTS**

MUC REPRESENTATIVE:

DATE:

SIGNATURE

Revised 10/2014