

Application for a leak allowance

Applicant Contact Details:

Customer number: _____ Full name: _____

Contact number(s): _____

Email address: _____

Supply Address & Details:

Property address: _____

Are you the: **Owner** **Tenant**

Postal address (if different to above): _____

Leak Details:

What alerted you to the leak? _____

Date detected: _____ Number of leak points: _____

Has the leak been repaired? _____

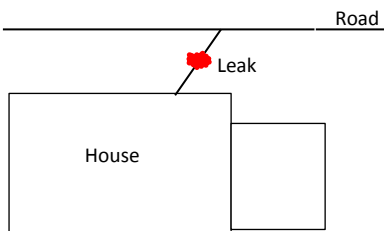
Who repaired the leak (full name or company name)? _____

_____ Date of repair: _____

Please state the work undertaken in order to repair the leak: _____

Location of leak in relation to your property:

Example.



Insurance Details:

Who is your household insurer? _____

Have you made a claim with your insurer for the leak? If yes, at what stage is your claim? _____

Does your insurer cover part/all of the repair costs? _____

Does your insurer cover part/all of the water loss costs? _____

Please enclose a copy of your insurance letter in order for us to assess your claim

Have you made a leak allowance claim for this property with Guernsey Water before? Yes No

Details (date/allowance given): _____

To help us assess your allowance, are there any reasons your previous quarterly usage could contain anomalies? Anomalies could be caused by the filling of a swimming pool or extra guests staying at your property etc.

Any other notes: _____

Please list any attached images/notes here:

Guernsey Water will use the information you provide to enable us to respond to you, provide our services and supply information about our services. The information will be retained for as long as is commercially, legally and administratively necessary. Do not sign the form if you do not want Guernsey Water to use the information as described, however Guernsey Water will not be able to provide the services. If you have any queries regarding Data Protection at Guernsey Water then our full Privacy Policy is available on our website www.water.gg or contact The Data Guardian, Guernsey Water, Brickfield House, St Andrews, GY6 8TY

I hereby certify that the information I have supplied in this application is true & correct to the best of my knowledge. I understand that any persons named on this form may be contacted by Guernsey Water to discuss the circumstances regarding the leak.

Signature: _____ **Date:** _____