

WATER LEAK RELIEF

ENROLL IN LEAK PROTECTION

ACCOUNT # _____

ACCOUNT NAME: _____

_____	RESIDENTIAL.....	\$2.50
_____	COMMERICAL	\$5.15
	SINGLE OCCUPANCY	
_____	COMMERICAL.....	\$8.55
	MULTIPLE OCCUPANCY	

Please add the above charge to my monthly bill for leak protection. There is a 30 day waiting period before benefit claims can be made. Program is subject to Terms & conditions.

SIGNATURE: _____

DATE: _____

