SWORN STATEMENT FOR LEAK/REPAIR CREDIT

Customer Name:	
Customer Account Number:	
Date:	
Service Address:	
Telephone Number:	
I,	, want to make the following
statement under oath:	
Initials of Person Making Statement:	Page 1 of 2
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SWORN STATEMENT FOR LEAK/REPAIR CREDIT

AFFIDAVIT	
I,	
	(Signature of Person Making Statement)
Witnesses:	Subscribed and sworn to before me, a person authorized by law to administer oaths, this day of, 20, at
Name:	<u></u> ;
	(Signature of Notary)
Address	Printed Name:
City, State, ZIP	My term expires:
Name:	_
Address	(seal)
City, State, ZIP	
Initials of Person Making Statement:	Page 2 of 2