



City of Grosse Pointe Park

DEPARTMENT OF PUBLIC WORKS

CUSTOMER ADJUSTMENT REQUEST

Account number: _____ Service address: _____

Name on Account: _____

NOTE: The decision of the City will be emailed to the email address provided below

Email address: _____ Phone: _____

Due Date of Bill: _____ Amount of the Penalty: _____

NOT ELIGIBLE:

- Non-receipt of / failure to receive a mailed paper bill
- Customer-side tampering, bypassing or fraud
- Transfer of ownership of home
- Customer-caused leaks due to negligence
- Routine inability to pay

Reason for hardship: _____

Signature: _____ Date: _____

(bottom section of form is for office use only)

Amount of bill: _____ Due date: _____ Amount paid: _____ Date paid: _____

Amount of penalty: _____ Current account balance: _____

Number of penalties in the past 2 years (not including this time): _____

Number of times penalty charge reversed: _____

Has this account ever been granted an adjustment in the past? NO YES list date(s) _____

Comments: _____

City Administration signatures:

Finance Director

DPW Director

Date customer contacted: _____ via: _____ by (staff name): _____

UTILITY BILLS CAN BE VIEWED ONLINE AT WWW.BSAONLINE.COM

CALL THE CITY FOR ANY OTHER ASSISTANCE REGARDING YOUR BILL

RETURN FORM TO DPW BY: email to utilitybilling@grossepointepark.org

by mail, drop-box or in person at: 15115 E Jefferson, Grosse Pointe Park, MI 48230