

# Domestic leak repair contribution application



1. Customer reference number:

2. Name of customer responsible for payment:

3. Address of premises/supply:

4. Address for correspondence (if different):

5. Do you own the property?

Yes  No

If No, who owns the property (e.g. Council, Housing Association, Private Landlord)

6. Have you repaired or replaced your service pipe?

Repaired

Replaced

7. Please advise who you would like the cheque made payable to if your application is successful:

Please ensure you include a materials receipt (from the contractor who undertook the repair) so we can process your application. Without this we will not be able to grant a leak contribution.

I certify to the best of my knowledge the above information is correct.

Name: \_\_\_\_\_ Contact number: \_\_\_\_\_

Signed: \_\_\_\_\_ Date: \_\_\_\_\_

South West Water P.O. Box 4762, Worthing, BN11 9NT  
0344 346 2020\* Minicom 0800 169 9965 Fax 01392 423792

\*03 numbers are charged at standard rates and will be included in any free minutes in a mobile or landline phone contract.

[southwestwater.co.uk](http://southwestwater.co.uk)

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