Tuppers Plains-Chester Water District
39561 Bar 30 Road
Reedsville, OH 45772
Phone (740) 985-3315 **Fax (740) 985-3320**
(800) 686-3747 **Email: info@tpcwd.org**

Visit us at: www.tpcwd.org

(This institution is an equal opportunity provider and employer.)

LEAK INSURANCE

The Board approved the following Leak Insurance Policy. As you know the billing is behind approximately one month. The leak insurance would be in effect for any loss due to a leak occurring after July 1, 2026.

1. The annual fee has been set at $25.00 for $500.00 of coverage or $50.00 for $1,000.00 of coverage. The fee would be due July 1st of each year. A form will be mailed to each customer prior to July 1st.

2. The customer would be required to notify the District when a leak is discovered and when repairs are completed. This would ensure that the correct time frame is being used to calculate the loss. The customer would pay their average usage, which is held in the computer based on the last twelve months, and the balance of the bill would be paid from the leak insurance fund. We reserve the right to request proof of repair and right to refuse due to negligence and/or lack of action by customer.

3. The leak insurance fund will pay up to the maximum amount selected per year, per customer. After the maximum is reached, the customer would be responsible for any additional cost for the remainder of the year. The fund cannot be used to cover the cost of filling a pool, as this is not a leak.

If you are interested in participating in this program, please complete the form below and check which option

Please return with your payment of $25.00 or $50.00. Cash or Check only

☐ **$25.00 for $500.00** ☐ **$50.00 for $1,000.00**

Name:_____ Account No._____

Phone No. _____

Address:_____

Cell No. _____

_____

Email address:_____

Date:_____ Signature:_____