



Request for Administrative Adjustment

1000 City Center Circle, Port Orange FL 32129

Phone: 386-506-5720 Email: customerservice@port-orange.org

Utility Account Number:

Customer Name:

Service Address:

Phone Number:

E-Mail:

To be eligible for an adjustment you must meet one of the following conditions listed per Ordinance below.

Ordinance No. 2018-22 Section 2-240 (4)

1. The adjustment is warranted due to a billing error made by the City.
2. The customer inadvertently transposes one or more numbers while making a payment.
3. The customer inadvertently pays the previous month's statement balance resulting in a late payment penalty.

Reason for Request:

Customer Signature: _____ Today's Date: _____

FOR OFFICE USE ONLY:

Date Received: _____

- Noted Customers Account
- Updated Customers Contact Info

Approved or Denied: _____
