

SEWER BILLING CLAIM, 900 Chester Ave, Delran, NJ 08075
Phone: 856-461-7736 Fax: 856-764-7364 email: tjohns@delrantownship.org

Date: _____ Sewer Account# _____

Name: _____

Address: _____

Telephone #: _____

Block: _____ Lot: _____

Why you think billing is incorrect: _____

Documentation to support your claim- you must attach copies of the January, February and March of the previous year's water bills for processing. The minimum charge of \$102.75 is for 10,000 gallons or less (the total of all three months) and \$5.00 for each 1,000 gallons used after the minimum for residential. The business minimum is \$179.20 for the first 10,000 gallons and \$7.20 for each additional 1,000 gallons.

If you had an excessive bill due to a leak you must attach copies of your plumbing bills to fix the problem or your claim will not be considered. For proof of your water leak, you must provide the water bill showing the high usage and the water bill after fixing the leak to show the reduction of water use. _____

Any changes to billing must be approved by Township Council at a meeting and a resolution must be passed to make any changes in billing. You will be notified if the change is approved. Changes will only be made if request submitted by April 30 of the billing year.