

ERIE COUNTY WATER AUTHORITY
AUTHORIZATION FORM
For Approval/Execution of Documents
(check which apply)

Contract: _____	Project No.: _____
Project Description: <u>LEAK ALLOWANCE REQUEST</u> <u>ONE LEAK ALLOWANCE IN THE AMOUNT OF \$1,209.58</u>	

Item Description:

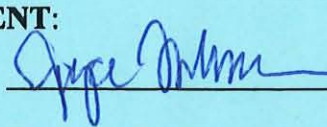
<input type="checkbox"/> Agreement	<input type="checkbox"/> Professional Service Contract	<input type="checkbox"/> Amendment	<input type="checkbox"/> Change Order
<input type="checkbox"/> BCD	<input type="checkbox"/> NYSDOT Agreement	<input type="checkbox"/> Contract Documents	<input type="checkbox"/> Addendum
<input type="checkbox"/> Recommendation for Award of Contract	<input type="checkbox"/> Recommendation to Reject Bids		
<input type="checkbox"/> Request for Proposals			
<input checked="" type="checkbox"/> Other <u>LEAK ALLOWANCES</u>			

Action Requested:

<input type="checkbox"/> Board Authorization to Execute	<input type="checkbox"/> Legal Approval
<input type="checkbox"/> Board Authorization to Award	<input type="checkbox"/> Execution by the Chairman
<input type="checkbox"/> Board Authorization to Advertise for Bids	<input type="checkbox"/> Execution by the Secretary to the Authority
<input type="checkbox"/> Board Authorization to Solicit Request for Proposals	
<input checked="" type="checkbox"/> Other <u>BOARD APPROVAL</u>	

Approvals Needed:


APPROVED AS TO CONTENT:

<input checked="" type="checkbox"/> Department Head	<u></u>	Date: <u>10/8/2019</u>
<input type="checkbox"/> Risk Manager	_____	Date: _____
<input type="checkbox"/> Director of Administration	_____	Date: _____
<input type="checkbox"/> Executive Engineer	_____	Date: _____

APPROVED AS TO FORM:

<input type="checkbox"/> Legal	_____	Date: _____
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APPROVED FOR BOARD RESOLUTION:

<input checked="" type="checkbox"/> Secretary to the Authority	<u></u>	Date: <u>10/9/19</u>
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Remarks: _____

Resolution Date: _____	Item No: _____
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ERIE COUNTY WATER AUTHORITY

INTEROFFICE MEMORANDUM

September 20, 2019

To: The Board of Commissioners

From: Karen A. Prendergast, Chief Financial Officer

Subject: Leak Allowance Request

Below is a leak allowance request submitted by our customer and processed by our billing department. Since the leak allowance amount is in excess of \$500, it requires your approval.

Leak Allowance:

Customer: WNY Catholic Long Term Care
6400 Powers Rd.
Orchard Park, N.Y. 14127

Sometime between mid July of 2018 and mid August of 2018, the above customer had a leak on their water service resulting in excess water usage. The customer made the necessary repairs and consumption returned to normal as verified by subsequent meter readings taken by our Meter Shop.

Other details on this account are as follows:

Water Billing During Period of Leakage	\$	3,846.59
Less Normal Billing		<u>(1,407.43)</u>
Total Excess	\$	2,439.16
 ECWA Portion of Excess*	 \$	 1,219.58
Customer Portion of Excess*		<u>1,219.58</u>
	\$	2,439.16
 ½ of Excess	 \$	 1,219.58
Less Administration Fee		<u>(10.00)</u>
Leak Allowance Request	\$	1,209.58

* NOTE: Any difference in consumption is due to rounding an odd number of gallons and due to the high consumption a portion of the bill was calculated using a lower rate. The Authority's portion includes the amount billed at the lower rate. Both portions represent ½ of the consumption.