Residential Sewer Service Charge (RSSC) Request for Adjustment

LA SANITATION - Financial Management Division (FMD)

www.lacitysan.org
https://myla311.lacity.gov

Customer Care Center
1 (800) 773-2489

Complete and sign this form:

Mail To: LA Sanitation, Residential SSC
PO Box 79083
Los Angeles, CA 90079-0083

Or Email to: san.rssc@lacity.org

To assist us in making an appropriate determination regarding your request for a residential sewer service charge adjustment, please provide detailed information below.

LADWP Account Number: _____

Your Name: _____ (Required if requesting an adjustment)

Service Address: _____

City _____ State _____ Zip _____

Mailing Address: _____
(If different from service address)

City _____ State _____ Zip _____

Telephone Number: ( ) _____

Language Preference: ☐ English ☐ Spanish ☐ Other _____

Do you have Ultra-Low-Flush (ULF) toilets? Y/ N Number: _____ Occupants: _____
(Circle "Y" for Yes or "N" for No) (Number of people living at premise)

Type of Adjustment Requested

☐ Vacancy Dates: _____
(Must state Start date to End date)

☐ Water Leak Date: _____
(Must submit dated repair bills)

☐ Construction Start Date: _____
(Must submit copy of demolition permit with Sewer Cap ID Number)

☐ Other: _____

☐ Swimming Pool Refill Date: _____
(Must state pool dimensions (length, width, depth), capacity and submit any repair bills)

☐ Planted New Lawn: _____
(Must submit copy of dated receipt)

Provide details of what you are asking for (required):

_____

_____

_____
(Additional space is provided on the reverse side of this form)

Signature: _____ Date: _____
(Must be the signature of the customer of record or joint account holder)

To receive confirmation of receipt of your request, please provide your email address:

Email Address: _____

(Revised May 2025)

Provide additional details to support your request for a sewer service charge adjustment: