

ADJUSTMENT - POOL FILL CREDIT REQUEST FORM

Utilities Customer Service • 120 Malabar Road SE • Palm Bay, FL 32907-3009 Phone: 321-952-3420 • Fax: 321-727-0693 • Email: ucs@pbfl.org

A rate adjustment may be available for filling a swimming pool. If a customer qualifies, the adjustment will be for water usage above the customer's monthly average to be charged at the first block/tier of the rate schedule. Wastewater consumption will be reduced to a monthly average.

The following rules and restrictions apply:

- · Request Form must be completed.
- Request must be received within 30 days of the bill date.
- One adjustment is permitted per 12 month period.
- Proof of filling pool must be provided.*

Customer Name:	
Service Address:	
Customer Account Number:	
Customer Phone Number:	
Bill Date for which adjustment is being requested:	
Pool Size (Gallons):	Fill Date:
Contractor's Name:	
*Attach documentation verifying pool fill work, including any	contractor invoices, supply purchases, etc
SIGNATURE (Requi	ired):
Customer Signature:	Date:
OFFICE USE ONI	LY:
Date of Last Pool Fill Credit (Must be 12 Months or Longer):	
Calculated/Entered by (Employee Name):	
Account Noted:YesNo	