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[www.greaterharrisonpsd.com](http://www.greaterharrisonpsd.com)

## POOL FILLING ADJUSTMENT APPLICATION

DATE: \_\_\_\_\_ ACCT. NUMBER: \_\_\_\_\_

CUSTOMER NAME: \_\_\_\_\_

PHONE NUMBER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

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### POOL INFORMATION

Gallons Used: \_\_\_\_\_ Date Filled: \_\_\_\_\_

Date Form Rec'd: \_\_\_\_\_ Dimensions: \_\_\_\_\_

Manufacturers Estimate of water volume: \_\_\_\_\_

**Please attach a current photo of your pool filled up**

(You can email your photo to [tina.ghpsd@gmail.com](mailto:tina.ghpsd@gmail.com) include Acct. #)

Date Adjusted: \_\_\_\_\_

The Greater Harrison County Public Service District will adjust sewer accounts once per calendar year for filling of pools, upon completion of the application. Final determination to your qualification for this adjustment will be made A>S>A>P> Adjustments will only be processed for fillings between April 15 and June 30 each calendar year. In the event that a failure would happen, causing the pool to be filled a second time, proof of said problem must be given for a second adjustment to be considered. Yearly renewal of this application is required.