



City of Kent
Swimming Pool Credit Questionnaire
Utility Billing Office
930 Overholt Road
Kent, OH 44240
UtilityBilling@Kent-Ohio.org

THIS QUESTIONNAIRE IS TO DETERMINE THE AMOUNT OF CREDIT FOR SWIMMING POOL WATER THAT WILL NOT ENTER THE KENT CITY SANITARY SEWER SYSTEM.

ACCOUNT NUMBER:

SERVICE ADDRESS:

ACCOUNT HOLDER'S NAME:

MAILING ADDRESS:

TELEPHONE #:

CAPACITY OF POOL:

GALS OR C.F.

DATE POOL FILLING BEGAN:

METER READ:

DATE POOL FILLED:

METER READ:

NOTE: NO SEWER CREDIT WILL BE GIVEN IF DATES AND METER READINGS ARE NOT FURNISHED.

I hereby request that a credit be given on the sewer portion of the City of Kent utility bill for the above amount of water. I hereby certify that this water will not enter the sanitary sewer system and that the above information is correct.

Signature of account holder

****SWIMMING POOL CREDITS MUST BE RECEIVED BY SEPTEMBER 15TH
FORMS RECEIVED AFTER THE 15TH WILL NOT BE PROCESSED.**

FINANCE USE ONLY BELOW THIS LINE
