POOL ADJUSTMENT FORM
(FOR SMYRNA SEWER ONLY)
CONSOLIDATED UTILITY DISTRICT

Account Number: _____Customer Number: _____

Name: _____Cycle #: _____

Service Address: _____

Water Meter Reading Start: _____   End: _____

Date Filled: _____

Gallons Used: _____

Any customer is eligible for a one (1) time pool adjustment per year.

The adjustment will be made after the bill reflecting the pool usage has been billed.

The adjustment will only be made on the sewer portion of your bill, not the water portion.

If you fail to take a reading before filling or are not sure how many gallons were used, we will use a 6 month average to determine amount of adjustment.