

**CITY OF KENT  
SWIMMING POOL CREDIT QUESTIONNAIRE**

**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 HOLDERS NAME:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_

**TELEPHONE NUMBER:** \_\_\_\_\_

**CAPACITY OF POOL:** \_\_\_\_\_ **GALLONS OR CUBIC FEET**

**AMOUNT OF WATER USED TO FILL THE POOL:**

**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 bill 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

**Finance use only below this line.**

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