

GREENTOWN UTILITIES

112 N. Meridian St. PO Box 247 Greentown, In 46936- Ph 765.628.3263 Fax 765.628.4002

POOL FILL SERVICE ORDER

Date_____

Name_____ Account Number_____

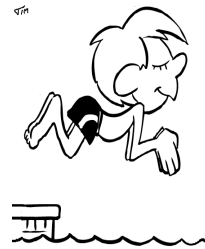
Address_____ Telephone_____

POOL FILL CREDIT WILL BE GIVEN ONCE A YEAR IN THE MONTH OF MAY ONLY. YOU WILL BE RESPONSIBLE FOR THE COST OF WATER USED TO FILL YOUR POOL. YOUR WASTEWATER CHARGE WILL REFLECT THE ADJUSTMENT OF THE WATER USED TO FILL YOUR POOL.

FORM MUST BE FILLED OUT PRIOR TO POOL BEING FILLED

SIGNATURE_____

UTILITY CLERK SIGNATURE_____



OFFICE USE ONLY

DATE OF ADJUSTMENT_____