

POOL FILLING ADJUSTMENT FORM APPLICATION

PO Box 190 West Milford, WV 26451

Phone: 304-745-3463

Fax: 304-745-5327

(Please return form & filled pool photo to: april.ghpsd@gmail.com. Include acct. #.)

www.greaterharrison.com Email: april.ghpsd@gmail.com

DATE:	ACCT.:
CUSTOMER NAME:	
PHONE NUMBER:	
ADDRESS:	
	OOL INFORMATION:
GALLONS USED:	DATE FILLED:
DATE FORM REC'D:	DIMENSIONS:
MANUFACTURERS' ESTIMATE	OF WATER VOLUME:
DATE ADJUSTED:	
* The Greater Harrison County Publ	c Service District will adjust sewer accounts once per

* The Greater Harrison County Public Service District will adjust sewer accounts <u>once per calendar year</u> for filling pools, upon completion of the application. Final determination as to your qualification for this adjustment will be made ASAP.

Only customers with sewage are eligible for adjustments for filling pools. Adjustments will only be processed for fillings between April 15 & June 30, each calendar year. In the event that a failure would happen, causing the pool to be filled for a second time, proof of said problem must be given for a second adjustment to be considered. Yearly renewal of this application is required.

"THIS IS AN EQUAL OPPORTUNITY PROGRAM. DISCRIMINATION IS PROHIBITED BY FEDERAL LAW." TO FILE A COMPLAINT OF DISCRIMINATION, WRITE USDA, DIRECTOR OFFICE OF CIVIL RIGHTS, 1400 INDEPENDENCE AVE., S.W., WASHINGTON, DC 20250-9410 OR CALL (800)795-3272(VOICE) OR (202)720-6382 (TDD).