



City of Lowell

POOL FILLING ADJUSTMENT FORM

NAME: _____

ADDRESS: _____

ACCOUNT NUMBER: _____

CONTACT NUMBER: _____

DATE POOL WAS FILLED: _____

POOL SIZE (GALLONS): _____

BEGINNING METER NUMBER AT TIME OF FILL: _____

END METER NUMBER AT TIME OF FILL: _____

CUSTOMER SIGNATURE: _____

City of Lowell Pool Fill Adjustment Policy

- Only one pool filling adjustment is given per year for each address.
- The adjustment will be for the sewer portion that is above the normal usage. However, if you are a water only customer or fill your pool from an irrigation meter, you will not be eligible for an adjustment.
- The average will be calculated using the average water usage for the last six months.
- It may take up to two billing cycles for your adjustment to reflect on your account.

Please call us if you have any questions.

Return completed form to City Hall, located at 101 W. First Street.

***** OFFICE USE ONLY *****

Gallons Used: _____ Adjusted Amount: _____

Average Usage: _____ Date Adjusted: _____