



REQUEST FOR SEWER CHARGE CREDIT

Name: _____ Account #: _____

Address: _____ Phone #: _____

Reason for Request (please check one)

Water Leak	<p>A receipt from a licensed/ certified plumber, detailing leak location information, is required for credit consideration.</p> <p>*** Please note: The City of Homestead, while under no obligation, will review and consider adjustments for sewer charges.</p>
Fill Pool/ Spa	<p>Date Started Filling Pool: _____</p> <p>Reading Before Pool Filled: _____</p> <p>Date Ended Filling Pool: _____</p> <p>Reading After Pool Filled: _____</p> <p>Size of Pool: _____ (Example: 10' x 75')</p> <p>*** Please note: only ONE refill per year can receive a credit</p>

Customer Signature

Date

Please return this letter via fax to Customer Service – Attention Billing
Department at 305-224-4839