

**CITY OF WILMINGTON  
UTILITY BILLING OFFICE  
APPLICATION FOR DEDUCTION OF SEWER  
FOR FILLING SWIMMING POOLS**

**ACCOUNT NUMBER:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**CUSTOMER NAME:** \_\_\_\_\_

**SERVICE ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_ **POOL FILL DATE:** \_\_\_\_\_

**DIMENSIONS OF POOL: (RECTANGLE) WIDTH** \_\_\_\_\_ **L** \_\_\_\_\_ **D** \_\_\_\_\_

**DIMENSIONS OF POOL: (ROUND) DIAMETER:** \_\_\_\_\_ **DEPTH:** \_\_\_\_\_

**ESTIMATED GALLONS POOL WILL HOLD:** \_\_\_\_\_

**TOTAL FILL: YES OR NO**      **IF NO, HOW MANY ADDED FEET:** \_\_\_\_\_

**ADDITIONAL COMMENTS:**

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**TO BE COMPLETED BY UTILITY BILLING DEPARTMENT:**

**ACTION:    APPROVED    OR    DENIED**

**IF DENIED, REASON:** \_\_\_\_\_

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**GALLONS ALLOWED FOR DEDUCT:** \_\_\_\_\_ /2 = \_\_\_\_\_

**DOLLAR DEDUCT:** \_\_\_\_\_ **DATE CREDITED:** \_\_\_\_\_

**CLERK:** \_\_\_\_\_