

REQUEST FOR A SEWER CREDIT APPLICATION*

2 \$ ORLANDO AVENUE COCOA BEACH, FL. 32931

The following rules and restrictions apply:

PHONE: (321) 868-3253

One adjustment is permitted in an eleven (11) month period for water lost through leaks.

☐ The request for a sewer credit application must be fully completed.

☐ Requests must be received within 90 days of the bill date.

WEBSITE: www.cityofcocoabeach.com

One adjustment is permitted in an elevelAdministrative fee will be deducted from	n (11) month period for water used for pool fills. n any credit adjustment granted.
Please Note: <u>SEWER CREDITS ARE NOT GUAR</u>	ANTEED, nor granted due to the following:
toilets, inside faucets, etc. Careless or undetermined use of water. Attach a copy of the document	ted repair invoice, or bill for parts. til verification of repair is provided.
HIGH COM	NSUMPTION
□ POOL REFILL	☐ LEAK REPAIR
■ NEW POOL REFILL	☐ OUTSIDE HOSE
POOL REPAIR NUMBER OF GALLONS USED TO FILL POOL:	☐ OUTSIDE IRRIGATION ☐ OTHER (PLEASE DESCRIBE):
SERVICE ADDRESS	
PHONE #/ EMAIL	
ACCOUNT NUMBER	SIGNATURE OF ACCOUNT HOLDER OR REPRESENTATIVE

*IN ACCORDANCE WITH CODE OF ORDINANCES, SECTION 19-5 (H)