



BOARD OF COUNTY COMMISSIONERS

UTILITY SERVICES DEPARTMENT

2725 Judge Fran Jamieson Way
Building A, Room 213
Viera, Florida 32940
Phone: 321-633-2093
Fax: 321-633-2095

REQUEST FOR A SEWER CREDIT

Requests must be received within 60 days of the date of the bill for which an adjustment is requested.

NAME: _____ DATE: _____

ADDRESS: _____

CITY AND ZIP: _____

DAYTIME PHONE NUMBER: _____

EMAIL ADDRESS :

ACCOUNT NUMBER: CITY OF MELBOURNE _____ **OR**
CITY OF COCOA _____

DATE OF POOL FILL * : _____ **OR** DATE OF LEAK REPAIR ** : _____

SIGNATURE OF ACCOUNT HOLDER: _____

SEWER CREDITS ARE NOT GUARANTEED, NOR GRANTED DUE TO THE FOLLOWING REASONS: LEAKS WHERE WATER ENTERS THE SANITARY SEWER SYSTEM (LEAKING TOILETS/FAUCETS, ETC.), WATER USED FOR IRRIGATION, NEGLIGENT OR UNDETERMINED USE OF WATER.

CONTINUE TO PAY YOUR BILL ON TIME TO AVOID SERVICE INTERRUPTION. ANY APPROVED CREDIT WILL APPEAR ON A SUBSEQUENT BILL.

* ONE POOL FILL SEWER CREDIT ALLOWED PER 12 MONTHS

** CREDIT FOR A LEAK MUST INCLUDE A COPY OF THE PLUMBER'S BILL

FOR OFFICE USE ONLY:

DATE	CONSUMPTION	CHARGE	AVERAGE
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____