CITY OF HENRY, TENNESSEE

Swimming Pool Adjustment Calculation Form

To be completed by customer seeking swimming pool adjustment:

Date:	
Name:	
Service	
Address:	
Phone	
Number:	
Account	
Number:	
Date Swimming Pool	
s to be Filled:	
Size of Pool (Length x Width x	
Average Depth) in feet	

CERTIFICATION

I HEREBY CERTIFY THAT ALL INFORMATION I HAVE PROVIDED IN SUPPORT OF MY CLAIM FOR A SWIMMING POOL ADJUSTMENT IS TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF.

Customer's Signature

To be completed by the City Recorder:

 Has customer received swimming pool adjustment within the last 12 months? (If yes, customer is ineligible for adjustment) 	
 Has city staff verified approximate dimensions of the pool? 3. 	
4. Calculate cubic feet of pool (length x width x average depth)	
5. Calculate water capacity of pool in gallons (Line 2 x 7.48). This is the amount of the adjustment.	

City Recorder's Signature

Date

Mayor's Signature

Date