

VILLAGE OF REEDSVILLE
Swimming Pool Discount Application

Pool Owner: _____

Pool Location: _____

NOTE: If more than one filling is required, please submit all dates and starting and ending meter reading.

Date when filling pool: _____

Starting Meter Reading: _____

Ending Meter Reading: _____

Signature: _____ Date: _____

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Office Use Only

Date Received: _____ Account #: _____

Gallons Used: _____ Date Recorded: _____

Discount Given: \$ _____