



TOWN OF PHILLIPSBURG POOL CREDITS

REQUEST FOR SEWER CREDIT FOR NEW SWIMMING POOL / OR LINER REPLACEMENT

DATE _____

NAME _____ ACCOUNT NUMBER _____

PROPERTY ADDRESS _____

PHONE _____ EMAIL _____

INSTRUCTIONS

1. Include copy of Pool Permit or Pool Invoice showing size and dimensions of pool.
2. Credit is calculated on consumption

Please complete the information above and return completed form to:

**TOWN OF PHILLIPSBURG
ATTN: SEWER DEPT.
675 CORLISS AVENUE
PHILLIPSBURG, NJ 08865**

PROPERTY OWNER'S CERTIFICATION

I certify that the above information regarding a swimming pool located at the property specified is true and accurate, and I further certify that the pool was actively in use for the year I am applying for this credit.

Homeowners Signature _____ Date _____