



Village of Geneva-on-the-Lake
4929 South Warner Drive
Geneva-on-the-Lake, Ohio 44041
Phone: 440-466-8197 Fax: 440-466-8911

www.genevaonthelake.org

Swimming Pool Sewer Credit Application Form

Owner Name _____
Owner Address _____
Phone _____
Property Address _____
(if different from above)
Water Account # _____

I, _____, hereby request an adjustment to my sanitary sewer account for the purposes of filling/draining a swimming pool consistent with 921.09 of the Codified Ordinances of Geneva-on-the-Lake and that all statements and documents attached are true and correct to the best of my knowledge.

Signed _____ Date _____

Office Use Only

Requirements:

- Attached evidence water consumption was used for the filling of a pool.
- Verified pool does not drain into the Sanitary Sewer System.

Inspected: _____ Date _____
WWTP Supervisor

Date Submitted to ACDES & Fiscal Officer : _____