

HOBART SANITARY DISTRICT

(219) 942-3516

SWIMMING POOL FILL FORM

Sewer assessment credit can be waived on the number of gallons used to fill a swimming pool one time each year between April 1 and June 9 for residents with pools. In order to qualify for this credit, the resident must complete this Swimming Pool Fill Form. This information must be returned to the HSD within 72 hours of a pool fill.

Address Letter to: Hobart Sanitary District Payment Office
705 E. 4th St.
Hobart, IN 46342

NAME: _____

ADDRESS: _____

CITY / STATE / ZIP: _____

PHONE: _____

SEWAGE ACCOUNT #: _____

Date Pool was Filled: _____

Capacity of Pool: _____

Meter Reading Before Filling: _____

Meter Reading After Filling: _____

TOTAL GALLONS USED: _____

The total will be figured in your average usage and will affect your summer billing months only.