

Pool Allowance Request Form

WEWJA Customers Only

Please complete the information below and return it to our office by any of the following:

Fax: 724-993-4741

Email: customerservice@wewja.org

Regular Mail: PO Box 510, Washington PA 15301

Drop Off: 2 Wilson Avenue, Washington PA 15301

Please Note: This adjustment is provided as a courtesy and can only be provided once per calendar year.

Customer Information

Name:

Service Address:

Sewage Account Number:

Phone Number:

Pool Information

Date of Fill:

Meter Beginning Read:

Meter End Read:

Pool Shape:

Pool Dimensions and Depth:

Above Ground:

Inground:

Complete Fill:

Partial Fill (include inches or feet):

If you have any questions, please feel free to contact the office at 724-225-1010.

Note: Please include as much information as possible in order to adjust account accurately.