MIAMIBEACH

Finance Department, Utility Billing 1700 Convention Center Drive, Miami Beach, FL 33139

_____

_____

_____

Subject: ACCOUNT:_____

METER ADDRESS:_____

Dear _____,

In order for the City of Miami Beach's Public Works Department to consider your request to make an adjustment of your sewer charges for the filling of your swimming pool, please submit the enclosed affidavit. Please provide the dimensions of your swimming pool and the amount of gallons, if known.

This affidavit is to be signed by you and must be notarized. For your convenience, there is a notary at City Hall (1700 Convention Center Drive – 1st Floor). Please bring proper identification for the notary and you may submit your request.

When you have completed all of the above requested information, if you prefer to mail your affidavit, you may mail it directly to the Public Works Department at the address listed below:

City of Miami Beach Public Works Department
451 Dade Blvd
Miami Beach, Fl 33139
Attention: Andrea Stringer

Please be advised that in order to receive an adjustment for sewer charges for the filling of a swimming pool, the entire pool's capacity must be reflected in the volume billed on a meter that is assessed sewer fees. Sewer charges will not be adjusted for partial pool fillings.

If you have any questions please call this office at (305) 673-7440.

Sincerely,

Utility Billing

We are committed to providing excellent public service and safety to all who live, work, and play in our vibrant, tropical, historic community.

SEWER FEE ADJUSTMENT REQUEST
POOL FILLING AFFIDAVIT

MIAMIBEACH

FOR PUBLIC WORKS DEPARTMENT ONLY
_____SFA APPROVED _____NUMBER OF UNITS

FROM _____/_____/_____ TO _____/_____/_____
_____SFA DENIED REASON_____
_____
_____

BY: _____ DATE_____/___/_____

DATE: _____

ROUTE_____ **CYCLE**_____

METER NUMBER(S) _____

ACCOUNT NUMBER_____

SERVICE ORDER NUMBER_____

METER ADDRESS_____

TO WHOM IT MAY CONCERN:

Please be advised that all water registered due to the complete refilling of a swimming pool on _____
(date)

at the above address did in fact run into the ground and not into the City sewers.

I can be reached at _____ if you have any questions.
(DAYTIME PHONE NUMBER)

DIMENSIONS OF POOL: _____ **X**_____
(length in feet) (width in feet)

DEPTH: _____ & **DEPTH**_____
(shallow end in feet) (deep end in feet)

NUMBER OF GALLONS, IF KNOWN: _____

BY: _____
Customers/Representative Signature

Sworn before me this
_____day of _____, 200___

_____
Signature of Notary Public

_____
Name of Notary Public

☐ Personally know to me; or

☐ Produced Identification

_____
Type of Identification

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