



*For Office Use Only:*  
Account #: \_\_\_\_\_  
Building Permit #: \_\_\_\_\_  
Village Manager Approval: \_\_\_\_\_  
Amount of Relief: \$ \_\_\_\_\_  
Date entered: \_\_\_\_\_

## Village of Walden Request for Sewer relief

Check Reason for Sewer relief Request:

- Installed New Pool
- Replaced Pool Liner
- Filled Pool
- Other (Please explain): \_\_\_\_\_

Property Address: \_\_\_\_\_

Pool Dimensions: \_\_\_\_\_

- Before Photos Attached
- After Photos Attached
- Copy of invoice or other proof attached showing dimensions of pool
- Verified in person on \_\_\_\_\_ (enter date)  
by (Name of Village Representative): \_\_\_\_\_
- Copy of water/sewer invoice covering usage period attached

Print & Sign: \_\_\_\_\_

Fax completed form to: 845-778-2170

Mail or Hand deliver completed form to: 1 Municipal Square Walden, NY 12586

Email completed form to: [deputytreasurer1@villageofwalden.org](mailto:deputytreasurer1@villageofwalden.org)

Questions? Call Village Hall 845-778-2177 (Option 4, Finance Department)