



TOWN OF NORTH ATTLEBOROUGH, MASSACHUSETTS

BOARD OF PUBLIC WORKS

APPLICATION FOR PARTIAL ABATEMENT OF WATER/SEWER BILL

This form must be *completely* filled out and submitted to:

**Department of Public Works, Water/Sewer Division
49 Whiting Street, North Attleborough, MA 02760**

1. TAXPAYER INFORMATION: Date: _____

A. Name(s) of Assessed Owner: _____

B. Name(s) and Status of Applicant (if other than Assessed Owner):

C. Mailing Address and Telephone No.:

Address Tel. No.

2. PROPERTY IDENTIFICATION:

A. Bill Number/Date _____

B. Total Amount of Invoice: \$ _____

C. Amount of Abatement Requested: \$ _____

D. Type of Abatement (Water and/or Sewer) _____

E. Land Located at (street address): _____

F. Description – Plat and Lot: _____

3. REASON ABATEMENT SOUGHT: Please explain in detail the reason for the abatement request:

4. SIGNATURE(S):

Subscribed this _____ day of _____, 20____, under the penalties of perjury.

Signature of applicant: _____

If not individual, signature of authorized officer: _____
Title

(Print or Type) Name	Address	Tel. No.
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ALL WATER/SEWER BILLS ARE PAYABLE BY THE DUE DATE INDICATED. A REQUEST FOR ABATEMENT DOES NOT RELEASE THE APPLICANT'S RESPONSIBILITY FOR TIMELY PAYMENT. APPROVED ABATEMENTS WILL BE CREDITED TO THE APPLICANT'S ACCOUNT.

DO NOT WRITE BELOW THIS LINE