



Town of Auburn D.P.W. – Sewer Division
Board of Sewer Commissioners
7 Millbury Street
Auburn, MA 01501

APPLICATION FOR ABATEMENT OF SEWER USE CHARGE
FISCAL YEAR 2019
(7/1/2018 – 6/30/2019)

Must be filed with the Board of Sewer Commissioners within 30 days of the bill date

RE: PROPERTY ADDRESS _____

Dear Sewer Commissioners:

I am requesting abatement of my sewer use bill for the noted reasons:

1. Water has been shut off – there was no water usage for the billing period.
2. Billing error as explained below:

3. I qualify for an exemption on my Real Estate Taxes, and therefore qualify for a 20% discount on my sewer bill.
4. Initial filling or complete re-filling of water in a swimming pool
- Initial filling (pertains to a brand new pool being installed)
 - Complete refilling (pertains to the pool being damaged and/or liner being replaced, resulting in complete refilling of the pool)
- Date of pool fill: _____ Size of pool/# of gallons _____
Meter readings (if available): Start _____ End _____
If possible, please provide copies of any supporting documentation available, i.e. pool repair bill or pool liner receipts.

Continued on reverse

5. Major water leak that resulted in significant water use increase:

The customer must submit documentation from plumber/contractor detailing the cause of the water leak, and verifying that the water usage from the leak did not enter the Town's sewer system.

6. Other:

I request abatement/adjustment of my sewer use bill for the following reasons:

To avoid accruing any interest charges, bill should be paid as charged. Refund will follow if abatement is allowed.

Date _____

Name _____ Signature _____

Address _____ Telephone # _____

Account # _____ Amount of Bill \$ _____

Please return completed form to: Auburn D.P.W. – Sewer Division
7 Millbury Street
Auburn, MA 01501
Fax (508)832-7804
Email: sewerbilling@town.auburn.ma.us

Sewer Commissioners use only:

Abatement amount approved \$ _____ (1ST INST.) Amount due \$ _____ Date _____

\$ _____ (2ND INST.) Amount due \$ _____ Date _____