

Town of Nahant, Massachusetts

Application for Utility Abatement

INSTRUCTIONS: Please type or legibly print all information. Attach any documentation that supports the abatement request. Sign, date and submit to: Office of the DPW, Town Hall, 334 Nahant Rd, Nahant, MA 01908. Applications must be received within 30 calendar days of the billing date of the disputed bill. For assistance in completing this form contact Mary Lowe, Nahant DPW at 781-710-4981.

Name of Applicant:	Application Number: (Leave Blank) Email:			
Mailing Address:				
				_ _
	uested for Water:			
Location and description of property served by the utility:				
Account #(s):	Date of Bill:		Billing period:	
Amount of Bill: \$ Amount of Abatement Requested: \$				
nterest and penalties if applica within 30 days of the date of	file abatement applications or reable). The request for an abatemente bill in dispute. Interest will as days. The consumption must be abayed.	ent or adjustment accrue on any an	t must be received in the Townount over 30 days old. Apparent three-year average to be	wn Administrator's office plications for abatements will
Request an abatement or adjustment for the reason stated below:				
Resident nResident wAbatement/Adjust	ment for Water and/or Sew nust submit copy of bill from vill be charged the average ment for error in estimated	m plumber ver use per person l reading	rifying the leak was fixe Plus 25%	
25% surch next reading	n is unable to obtain a read arge applied. (Average use ag will capture actual consu Adjustment (explain in con	e per person Pl amption and bi	us 25%). After repair/rull will be adjusted.	
Subscribed this	day of	20 u	nder penalties of perju	ry.
Signature of Applicant	:			
	Do not	write below this li	ne	
Reviewed by:		Date	of Review:	
Action Taken: App	proved Amount \$		Disapproved	
Annroval/Disannroval	Sianature:			Data