

APPLICATION FOR ABATEMENT OF 2025 ACTUAL SEWER ASSESSMENT

Must be filed with the Clerk or Secretary of the Board of Water Commissioners, or delivered by mail or otherwise at their office 39 Ayer Road, P.O. Box 2406, Littleton, MA 01460, within six months of the date the collector mailed the assessment notice. G.L. c. 80, § 5.

Amount of Actual Sewer Assessment: \$ _____

Name: _____

Property Address: _____

Billing Address (if different): _____

Phone Number for Contact: _____

I am requesting abatement of my Actual Sewer Assessment for the following reason:

1. The amount of the assessment is more than the increment in property value attributable to the improvement or the assessment reflects a disproportionate allocation of the cost of the project in relation to other benefited property. (Please explain below)

2. Administrative Error/Other. (Please explain below)

Hearing:

I wish to be present when the Board considers my abatement. Please contact me regarding the date and time.

I waive my right to be present when the Board considers my abatement.

Signature _____ Date _____

Signature _____ Date _____

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR ASSESSMENT; IT SHOULD BE PAID AS ASSESSED OR INTEREST WILL ACCRUE. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.

Board of Water Commissioners Use Only

Commission Decision

Abatement approved, for the amount of \$ _____

Denied

Comments: _____

