



# CITY OF NEWBURYPORT

NEWBURYPORT DEPARTMENT OF PUBLIC SERVICES  
WATER AND SEWER DIVISIONS  
WATER/SEWER APPLICATION FOR ABATEMENT

**PLEASE READ THE FOLLOWING CAREFULLY:**

Deadline for submittal of an application for abatement is 15 days after the issuance date of the bill in dispute. Applications will be reviewed by the Water/Sewer Staff, subject to final approval by the Water and Sewer Commissions. Please allow up to 8 weeks for a final decision on your abatement request, due to the scheduling of Water and Sewer Commission meetings.

An application for abatement will not be considered unless all prior bills on the account are paid and a payment is made on the bill in dispute in an amount equal to the bill issued for the same period in the prior year. For an applicant who does not have a prior billing history, the Department will determine an amount to be paid on the bill in dispute based on the number of occupants in the home during the period in dispute and industry averages of usage per occupant. No late fees will be assessed on the unpaid balance of a disputed bill while an application for abatement is being considered.

Applicants will be notified, in writing, of the determination of the Water and Sewer Commissions. Within 15 days of written notification, applicants may exercise their right to appear before the Water and Sewer Commissions if they wish for an appeal. If an applicant does not respond within 15 days, it will be deemed that the determination of the Water and Sewer Commissions is accepted and the applicant will have 30 days to pay the balance of the contested bill. No late fees will be assessed if the unpaid balance on the bill is received within 30 days of written notification.

**PLEASE RETURN COMPLETED APPLICATION AND SUPPORTING DOCUMENTS TO:**

DPS – Water/Sewer Business Office  
PO Box 880  
60 Pleasant Street  
Newburyport, MA 01950  
[wsbilling@cityofnewburyport.com](mailto:wsbilling@cityofnewburyport.com)



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## NEWBURYPORT DEPARTMENT OF PUBLIC SERVICES WATER AND SEWER DIVISIONS WATER/SEWER APPLICATION FOR ABATEMENT

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_ Acct #: \_\_\_\_\_

\_\_\_\_\_

This application is for abatement of Bill #: \_\_\_\_\_ Bill Date: \_\_\_\_\_

Reason(s) for which the abatement is requested (please attach supporting documentation; if abatement is sought for relief due to a leak, please provide a plumber's invoice showing that the leak has been fixed). Applicants may be asked to submit supplementary information to support the application for abatement.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_\_

----- OFFICE USE ONLY -----

Date Received: \_\_\_\_\_ Water Request: \$ \_\_\_\_\_ Sewer Request: \$ \_\_\_\_\_

Staff Review and Recommendation:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Submitted to Water Commission: \_\_\_\_\_ Date: \_\_\_\_\_

Water Commission Approved: \_\_\_\_\_ Denied: \_\_\_\_\_

Submitted to Sewer Commission: \_\_\_\_\_ Date: \_\_\_\_\_

Sewer Commission Approved: \_\_\_\_\_ Denied: \_\_\_\_\_