



WAYNE S. AMARAL, DIRECTOR  
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**CITY OF NEWBURYPORT**  
**DEPARTMENT OF PUBLIC SERVICES**  
16A PERRY WAY  
NEWBURYPORT, MA 01950

PHONE: 978-465-4464  
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*Policy 2024-01*  
*Water and Sewer Commission*  
*Abatement Policy*

The City of Newburyport Board of Water and Sewer Commissioners will consider a request for abatement from an abnormally high water and sewer bill caused by an accidental water release that **cannot reasonably be prevented**. The policy will establish an abatement for up to one half of the excess water consumption above normal consumption.

**Definitions:**

Accidental water release: Means water released from well-maintained plumbing system beyond reasonable past history usage and water was not planned to increase.

Cannot reasonably be prevented: Means regular plumbing maintenance is current and expected release was not foreseen and could not have been prevented.

Normal consumption: Is the consumption planned and is consistent with the average monthly usage over the prior four-quarters.

**Water Release Abatement Eligible:**

- A one-time pool fill or pool liner replacement within a ten (10) year period for a new pool when water can be proven to not have entered the sewer system. Only the sewer charges are eligible for abatement.
- Ruptured pipe or water system (example water tank) within the property that was not expected and not caused by poor property maintenance, and water did not enter the sewer system. **Request for such abatement is only allowed once in a three-year period.**

**Water Release Abatement Not Eligible:**

- Leaky toilet or plumbing fixtures.
- Challenges due to water meter reading.
- Due to property liens, sales, foreclosures or any property oversight negligence.
- Irrigation system.

**Requirements to Apply for Abatement:**

- All outstanding charges on the account must be paid. Applicant may also offer to make a good faith payment on current bill equal to the amount paid previous quarter.
- Disputed charges paid in the amount equal to the prior year's amount billed during the same consumption period.
- In the event there is no prior year history, the payment amount is calculated based on the number of occupants and the industry average per occupant.
- Request must be submitted within 30 days after the issuance of the bill in dispute.



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- Proof the accidental release is fixed and no longer releasing water, with copy of the bill from a licensed plumber that includes a detailed description of the repair. Water Division may request a site investigation to confirm such repairs have been completed.
- Applications received after 30 days of the bill date will be denied.

### **Procedure to Apply for Abatement**

- Complete the Water and Sewer Bill Abatement Application attached to this policy.
- Return the Bill Abatement Application and all supporting documents to the Department of Public Services (DPS) Water and Sewer Business Office at the below location.

DPS – Water/Sewer Business Office  
PO Box 880  
16C Perry Way  
Newburyport, MA 01950  
[wsbilling@cityofnewburyport.com](mailto:wsbilling@cityofnewburyport.com)

### **Abatement Decision Process**

- Applicants will receive written notification of the Water and Sewer Commission's decision to grant or deny the application for abatement.
- Applicants will have 15-days to appeal the decision in person with the Water and Sewer Commission by making such appeal in writing or e-mail at [wsbilling@cityofnewburyport.com](mailto:wsbilling@cityofnewburyport.com). Staff will inform applicant of the next scheduled meeting and place the applicant onto the next scheduled public meeting.
- If the applicant does not respond with 15-days of the Water and Sewer Commission initial written decision, the decision will be considered final.
- Applicant will have 30 days to pay the balance of the contested bill without any interest charge.

Approved by Water and Sewer Commission on March 27, 2024.



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**Policy 2024-01**  
**Water and Sewer Commission**  
**Abatement Application**

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_ Phone #: \_\_\_\_\_

Applicant Address: \_\_\_\_\_

E: Mail Address: \_\_\_\_\_

Account Number: \_\_\_\_\_

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

Please state the reason(s) for the abatement request and attach supporting documentation. Refer to Policy 2024-01 Abatement Policy for more information. Applicant may be asked to submit supplementary information and documentation to support the application for abatement.

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

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

**OFFICE USE ONLY – Below this line**

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

Staff Review and recommendation:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**COMMISSION USE ONLY – Below this line**

Abatement: Approved / Denied  
Commission Chair Signature: \_\_\_\_\_ Date: \_\_\_\_\_