

MUST BE FILED WITH THE HARWICH BOARD OF WATER COMMISSIONERS NO LATER THAN THE DUE DATE OF FIRST ACTUAL (NOT PRELIMINARY) TAX PAYMENT FOR FISCAL YEAR OF WHICH THE WATER CHARGE BECAME A PART.

THE COMMONWEALTH OF MASSACHUSETTS  
**TOWN OF HARWICH**  
**APPLICATION FOR ABATEMENT**  
WATER CHARGE

RECEIVED: \_\_\_\_\_  
ACCOUNT # \_\_\_\_\_  
BILL # \_\_\_\_\_

To the Board of Water Commissioners:

**NAME OF APPLICANT:** \_\_\_\_\_

**MAILING ADDRESS:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_ **MOBILE:** \_\_\_\_\_

The named person assessed by a water charge dated \_\_\_\_\_ hereby applies for abatement.

**NAME OF PERSON ASSESSED (OWNER):** \_\_\_\_\_

**PROPERTY LOCATION:** \_\_\_\_\_

**TOTAL AMOUNT ASSESSED \$** \_\_\_\_\_ **TOTAL AMOUNT REQUESTED \$** \_\_\_\_\_

CHECK IF REQUEST IS FOR **WATER USAGE**  **AMOUNT REQUESTED \$** \_\_\_\_\_

CHECK IF REQUEST IS FOR **LATE FEE**  **AMOUNT REQUESTED \$** \_\_\_\_\_

CHECK IF REQUEST IS FOR **OTHER**  **AMOUNT REQUESTED \$** \_\_\_\_\_

**REASON FOR ABATEMENT REQUEST (ATTACH ADDITIONAL SHEET IF NECESSARY)**

SUBSCRIBED THIS DAY OF \_\_\_\_\_ UNDER PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT \_\_\_\_\_

NAME IN FULL

**THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF THE CHARGE. CHARGE SHOULD BE PAID AS ASSESSED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED. SUBMIT THIS FORM TO THE HARWICH WATER DEPT. 196 CHATHAM ROAD, HARWICH, MA 02645 ATTN: BOARD OF WATER COMMISSIONERS OR FAX TO (888) 774-3557.**

RECOMMENDATION : APPROVE  DENY  BOARD OF WATER COMMISSIONERS

IF DENIED, PLEASE PROVIDE REASON:

DATE

SIGNATURE

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\_\_\_\_\_  
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