

TOWN OF WEST BOYLSTON



APPLICATION FOR ABATEMENT OF
SEWER BETTERMENT ASSESSMENTS

Must be filed with the Board of Sewer Commissioners within six months from date of the notice of assessment sent by the Tax Collector.

To the Board of Sewer Commissioners:

NAME OF APPLICANT _____

POST-OFFICE ADDRESS _____

The above-named person aggrieved by a _____ BETTERMENT ASSESSMENT
YEAR
hereby applies for an abatement.

NAME OF PERSON ASSESSED _____

Location and Description of Property --- No. of Street, Plan, or Lot and Area of Land.
Description must be sufficiently accurate to identify the premises.

Betterment Amount Assessed \$ _____ Amount Paid \$ _____

Assessment Paid by _____ on _____
DATE

IF THE APPLICANT IS NOT THE PERSON ASSESSED, what is the applicant's interest in the property?

SPECIFY PRESENT OWNERSHIP, MORTGAGE ORWHAT OTHER INTEREST

When was such interest acquired? _____
DATE

Complete statement of reasons for this application _____

CONTENTIONS OF LAW RAISED

SUBSCRIBED THIS _____ day of _____, 20 _____ UNDER THE PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT _____

NAME IN FULL

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.