



City of Barre, Vermont

" GRANITE CENTER OF THE WORLD "

WATER & SEWER APPEAL/ABATEMENT FORM

INSTRUCTIONS: Please type or legibly print all information. Attach documentation that supports the abatement request. Sign, date and submit to: City of Barre Water & Sewer Department (City Hall) 6 North Main St. Ste. 5 Barre VT 05641. Applications must be received within 30 calendar days of the billing date of the disputed bill. Late or incomplete applications will be returned. For assistance in completing this form call 802-476-0251.

Name of Applicant: _____

Property Location: _____

Mailing Address: _____

Telephone Number: _____

Utility Account Number: _____

Date of Bill: _____

Billing Period: From: _____ To: _____

Billing Amount: \$ _____

Abatement Requested: \$ _____

Reason for Abatement Request: _____

(use additional pages and/or attach supporting documents if needed)

Signature of Applicant(s): _____ Date: _____

(SECTION BELOW TO BE COMPLETED BY OFFICE PERSONNEL ONLY)

Reviewed By: _____

Date of Review: _____

Approve: _____ Deny: _____

Comments: _____
