

Town of Lexington Department of Public Works

Water/Sewer Division

Samuel Hadley Public Services Building

201 Bedford Street

Lexington, MA 02420



APPLICATION FOR ABATEMENT

Dear Lexington Water and Sewer Customer,

You reserve the right to dispute your utility bill. Applications must be submitted within 30 days of the bill you are disputing and your account cannot have any outstanding balances after submittal. You must also make a "good faith payment" on the bill you are disputing BEFORE you turn in your application. This payment must be equivalent to your prior bill from the same cycle, ie. if you are disputing your spring bill, the payment should be the same as your last spring bill. An application will not be considered unless these criteria are met.

The more information, details, photos, etc. you can provide us in regards to your dispute, the better. You must provide a background to why your bill was higher than normal, simply thinking the bill is too high is not a valid reason for an abatement. A leak abatement will not be approved without receipts or plumber's invoices proving you have fixed the problem. Please keep in mind that the Lexington Water and Sewer Department (LWSD) is not responsible for notifying our customers for having multiple estimated bills or abnormally high usage bills. It is the responsibility of the homeowner to properly maintain plumbing and pipes to avoid high usage leaks and pipe bursts. You can avoid SOME of these issues by contacting the water and sewer department to have water shut off at the street at vacant properties especially during the winter months. Property owners are also responsible for contacting the LWSD if they are not receiving their utility bills.

The bill dispute process can take 8-12 weeks. All disputes will be reviewed by the Water and Sewer Abatement Board (WSAB). You will be notified of their decision via mail and you will have 14 days to appeal the decision. After the 14 day period, all requests will be sent to the Board of Selectmen for final approval. Once final approval is given, you will be notified via mail your account balance and will be given 30 days to pay it off until interest begins to accrue. Even if your dispute is denied, your interest will be waived and you will still be given 30 days to pay your bill.

Sometimes applications will be tabled for another meeting where the WSAB will request more information. In the event this happens to you, you will be contacted via e-mail or telephone and your application will be discussed at the next meeting.

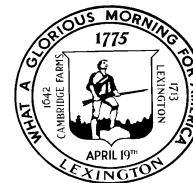
Should you have any further questions, please contact the Lexington Water and Sewer Utility Billing Manager at 781 274 8370 or vwalsh@lexingtonma.gov.

To make a payment on your utility account and to inquire about account balances, please contact the town collector's office at 781 698 4600.

Thank you.

*****PLEASE KEEP THIS LETTER FOR YOUR RECORDS AND UNDERSTANDING OF OUR POLICIES**

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APPLICATION FOR ABATEMENT

APPLICANT INFORMATION

NAME(S): _____
MAILING ADDRESS: _____
TELEPHONE: _____
E-MAIL: _____

SERVICE LOCATION INFORMATION

ACCOUNT #: _____
ADDRESS: _____

DISPUTED BILL INFORMATION

BILL #: _____ BILL DATE: _____ AMOUNT: _____

REASON(S) FOR WHICH ABATEMENT IS REQUESTED: (please attach any supporting documentation)

PLEASE CAREFULLY READ AND CHECK OFF THAT YOU ACKNOWLEDGE THE FOLLOWING

____ I UNDERSTAND THAT THIS APPLICATION MUST BE TURNED IN WITHIN 30 DAYS OF THE BILL ISSUANCE DATE OF MY BILL IN DISPUTE OR MY APPLICATION WILL BE DENIED

____ I UNDERSTAND THAT A GOOD FAITH PAYMENT EQUALLING THE SAME AMOUNT AS MY PRIOR BILL FROM THE CURRENT CYCLE MUST BE MADE ON THE BILL IN DISPUTE BEFORE I TURN IN THIS APPLICATION OR MY APPLICATION WILL BE DENIED

____ I UNDERSTAND THAT THERE CANNOT BE ANY OUTSTANDING BALANCES PRIOR TO MY BILL IN DISPUTE ON MY UTILITY ACCOUNT BEFORE I TURN IN THIS APPLICATION OR MY APPLICATION WILL BE DENIED

____ I UNDERSTAND THAT IF THE FINDINGS OF THE WSAB DETERMINE MY PIPES/PLUMBING/METER EQUIPMENT WERE NOT PROPERLY MAINTAINED MY APPLICATION WILL BE DENIED

____ I UNDERSTAND THAT IF I HAD A LEAK, I MUST PROVIDE A COPY OF A RECEIPT/PLUMBER'S INVOICE SHOWING THAT I HAVE FIXED THE ISSUE OR MY APPLICATION WILL BE DENIED

SIGN: _____ DATE: _____

FOR OFFICE USE ONLY

DATE SUBMITTED: _____ ///WITHIN 30 DAYS? YES NO ///PAYMENT AMT: _____

INITIAL: _____ WSAB MEETING DATE: _____