



TOWN OF ROYALSTON
SEWER COMMISSION
Box 125
Royalston, MA 01368

APPLICATION FOR ABATEMENT
Sewer Use Charge

Fiscal Year _____

Must be filed with the Sewer Commission within 30 days after the sewer bill was issued.

To the Sewer Commissioners,

APPLICANT/OWNER: _____

DATE OF BIRTH: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS: _____

(Only if different from Service Address)

REASON FOR ABATEMENT: _____

Subscribed _____ day of _____, _____ under penalties of perjury.
(day) (month) (year)

Signature _____

Disposition of Application (Commissioners' Use Only)

Granted () Denied () Date Voted _____

Approved by _____

SEWER COMMISSION

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF THE CHARGE. IT SHOULD BE PAID AS BILLED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.