



CITY OF CHICOPEE

DEPARTMENT OF PUBLIC WORKS



Elizabeth Botelho, P.E.
Acting Superintendent

Bill Wood
Chief Operator

Quinn T. Lonczak
Project Supervisor

ABATEMENT REQUEST/NOTIFICATION

TO BE COMPLETED BY RESIDENT REQUESTING ABATEMENT

DATE OF REQUEST: _____

ACCOUNT NUMBER: _____

ACCOUNT NAME: _____

PROPERTY ADDRESS: _____

MAILING ADDRESS: _____

PHONE NUMBER: _____

BILLING DATE(S): _____

BILL NUMBER(S): _____

REASON FOR ABATEMENT: _____

POOL SIZE (IF APPLICABLE): _____

AMOUNT OF ABATEMENT: _____ \$ _____
CUBIC FEET OR GALLONS DOLLAR AMOUNT

PREPARED BY: _____

TO BE COMPLETED BY BOARD OF SEWER COMMISSIONERS

THIS LETTER IS TO NOTIFY YOU THAT THE CITY OF CHICOPEE, BOARD OF SEWER COMMISSIONERS HAS VOTED TO APPROVE _____, DISAPPROVE _____ YOUR REQUEST FOR AN ABATEMENT IN THE AMOUNT OF \$ _____.

SINCERELY,

BOARD OF SEWER COMMISSIONERS

DATE

Water Pollution Control