TOWN OF RUMFORD APPLICATION FOR ABATEMENT OR CORRECTION Sewer Use Charge

Property Owners must submit the abatement application before the due date printed on the bill in which the error occurred to be considered. An abatement will be considered only for measured usage that did not enter the sewer system. Applications submitted late will not be considered. Accounts which have outstanding sewer balances from previous billed quarters will be denied unless full payment is submitted with the application to pay back charges. Any abatement(s) approved will be applied as a sewer credit and will not be refunded unless the account is closed permanently.

Name of Applicant(s) / Pro	perty Owner:				
Phone Number:	Email:				
Mailing Address:	Account #:_	Account #:			
Physical Location:	Amount of	Amount of Bill:			
Is there an outstanding balar	nce on the sewer account?	YES or	NO		
Was the consumption issue i	reported to the water district prior to the bill being issued?	YES or	NO		
If yes, please detail the date	and method of reporting used?	YES or	NO		
Date Reported:	How did you contact the office?				
Suspected Leak Swimming Pool Filling Has the issue been fixed of Reason for Abatement R	_	reet/No wat	er meter		
I have provided true and	accurate information. (Additional side may be used if	needed)			
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Applicant Signature	Date:				

Application may be submitted by email to: tbourret@rumfordme.org or brought to the Rumford Tax Office or mailed to: Rumford Tax Office/Sewer Dept., 145 Congress St. Rumford, ME 04276

Reason for Abatement Request Continued					
Please do not write bel	ow this line - SEWER D	EPARTMENT (ONLY		
Primary Meter Beginning Read:	Primary Meter End	ling Read:			
Second Installed Meter Read:	Bill Span:	Rate	Key:		
Are there any outstanding charges on	this account prior to abateme	nt request?	YES or NO		
Are there any other considerations for	abatement which should be r	eviewed?			
Billed Average	e for the previous four (4) qua	rters is: \$			
Abatement Approved by:					
Abatement Amount Granted: \$					
		_			
RSB designee:	rown Manager	·			
Internal Bill Correction issued by Se	wer Billing Dept:				
Reason for Correction:					
Amount corrected: \$ Da	te Applied in TRIO:	Clerk:_			
Date Town Contacted:	Was the Meter Corrected	d or Sewer Cappe	d? YES or NO		
Method of Correction: ABATEMEN	CORRECTION	BILL CREDIT	REFUND		