



City of Revere  
Water and Sewer Billing Department  
319 Charger Street  
Revere, MA 02151  
Office: 781-286-8145  
Fax: 781-286-8146

**Request for Abatement Consideration form**  
**Water & Sewer Billing**

Account #: \_\_\_\_\_  
Property Address: \_\_\_\_\_  
Owner's Name: \_\_\_\_\_  
Email: \_\_\_\_\_ Phone #: \_\_\_\_\_  
Bill #: \_\_\_\_\_ Bill Date: \_\_\_\_\_

Please summarize your reason for abatement below and include receipts of repair:


Signature: \_\_\_\_\_

Date of Application: \_\_\_\_\_

- This application will be reviewed, and applicant will be notified of decision within 30 days of receipt.
- No abatement request will be considered for a bill that is 45 days past the bill date.
- Account must be current as of the billing period prior to period in question.
- Please submit to [water\\_billing@revere.org](mailto:water_billing@revere.org) or to the address below:
  - City of Revere
  - 319 Charger St.
  - Attn: Water/Sewer Billing
  - Revere, MA. 02151

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\*Office use only

Name: \_\_\_\_\_

Date received: \_\_\_\_\_