



City of Revere
Water and Sewer Billing Department
281 Broadway, 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 or to the address below:
 - City of Revere
 - 281 Broadway
 - Attn: Water/Sewer Billing
 - Revere, MA. 02151

*Office use only

Name: _____

Date received: _____

