

CITY OF ROCHESTER
Water/Sewer Billing Appeal Application

Office Use Only:

Received: _____

1. Date of Appeal: _____
2. Property Owner's Name: _____ Account #: _____
3. Billing Address: _____

4. Service Location: _____ Zip Code _____
5. Owners Representative: _____
6. Owners Representative's Signature: _____
7. Phone #: _____ Cell: _____
8. Email Address: _____

(Agendas and Decision Letters will be emailed).

9. Billing Period that is being appealed is from _____ to _____

10. Abatement is being requested for:

a. How many units of water _____ x 6.41 = \$ _____

b. How many units of sewer _____ x 8.17 = \$ _____

C. Water & Sewer Department Fees of: \$ _____

Total \$ _____

11. Explanation of Appeal Request:

12. Do you dispute the meter reading used to determine your units of usage?

Yes No (circle one)

If yes, why?

13. Do you claim that there was a leak that caused higher than normal units of usage?

Yes No (circle one)

If yes, did the water enter the sewer system? _____

If yes, has the leak been repaired? _____

Who made the repair? _____

Has proof of the repair been attached to this appeal form? _____

14. If your appeal is denied, will this cause you financial hardship for which you will seek assistance from the City? If so, explain:

Please note:

- 1. Per Water Ordinance 260-19 and Sewer Ordinance 200-26 the appeals must be submitted in writing before the next payment is due.***
- 2. The Utility Advisory Board reviews abatement appeals at its monthly meetings which occur on the second Monday of every month at 5:30 P.M. at the DPW 209 Chestnut Hill Road.***
- 3. Abatement Appeal Applications must be received by the 27th of the month to be placed on the following month's UAB agenda.***
- 4. Customer's seeking abatement are encouraged, but not required, to appear before the UAB when their abatement appeal is reviewed.***
- 5. Customers seeking an abatement will pay the uncontested average bill for both water and sewer prior to due date as specified on the invoice.***