



CITY OF NEW BEDFORD
ASSESSING DEPARTMENT

REQUEST TO APPORTION SEWER / SIDEWALK BETTERMENT

Date Requested _____

City of New Bedford
Board of Assessors
City Hall
New Bedford, Ma. 02740

PLAT _____ LOT _____ INVOICE # _____

Please apportion the Sewer / Sidewalk Betterment assessed on the property of:

_____ (OWNER)

abutting on _____ (LOCATION)
into portions checked below:

FIVE _____ TEN _____ FIFTEEN _____ TWENTY _____ years.

FULL AMOUNT OF BETTERMENT: \$ _____.

ANY PAYMENTS MADE ON ACCOUNT: \$ _____.
(Attach copy of payment receipt)

AMOUNT TO BE APPORTIONED: \$ _____.

The first portion to appear on the final fiscal _____ tax bill.

SIGNATURE _____

ADDRESS _____

Chapter 80, Section 13, as amended,

“The Assessors may apportion the assessment into such number of equal portions, not exceeding twenty, as the owners shall in this notice request: but no portion shall be less than five (\$5.00) dollars.”