



Board of Water and Sewer Commissioners
TOWN OF FOXBOROUGH
70 ELM STREET
FOXBOROUGH, MASSACHUSETTS 02035

Michael P. Stanton, Chairperson
Richard M. Pacella, Jr., Vice-Chairperson
Robert T. Garber, Clerk

Robert B. Worthley
Superintendent
Telephone 508-543-1209
Fax 508-543-1227

Water Department Forms

Please find attached the following Water Department Forms:

- 1. Washing Machine Rebate Form**
- 2. Application for Water/Sewer Abatement**
- 3. Special Permit for Testing of Fire System/Fire Flow Tests**
- 4. Hydrant/Outlet Use Application**
- 5. Toilet Rebate Information Sheet**



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WASHING MACHINE REBATE APPLICATION

FOR
WATER CONSERVING WASHING MACHINES
\$75.00

Customer Name (from your Water Bill):

Property Address: _____

Number of People in Household: _____

Mailing Address: _____

Telephone Number: _____

email Address (optional): _____

Make/Model: _____

I hereby certify that I am a customer of record of the Foxborough Water Department for the above referenced property, or that I am the authorized representative of the customer. I understand that my water account must be current and my water meter may be replaced if requested by the Water Department (no charge for this) before a rebate check will be issued.

Signature of Customer

Date

Office Use Only:

Invoice #:

Authorized by:

99999

60450200 553090



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(508) 543-1209 (office)
(508) 543-1227 (fax)

APPLICATION FOR WATER/SEWER ABATEMENT

Name of Owner(s): _____

Location: _____

Account Number: _____

Reason for Seeking Abatement: (Please be very detailed – include attachments if necessary).

Attachments: Yes No

PLEASE NOTE: Payments to the above-referenced account ***MUST be paid in full***. The Bill Dispute Subcommittee will not consider requests for any account with an outstanding balance.

Signature: _____ Date: _____

Instructions: Please include sufficient information and clearly indicate why you feel your bill should be abated. Be certain to include the property location and Account Number. Please date and sign the application. You will be notified in writing whether or not an abatement has been granted. Application must be filed within 3 months of the date of the bill. The application will then be sent to the Board of Water and Sewer Commissioner's designated Bill Dispute Subcommittee.

Bill Dispute Subcommittee Appeal

If the customer still disputes the decision of the Bill Dispute Subcommittee, he or she may request a hearing before the full Board of Water and Sewer Commissioners by contacting the Water Superintendent at (508) 543-1209 and requesting to be put on the agenda of a subsequent Board of Water and Sewer Commissioners hearing. Please be advised that appeals from the decision of the Board of Water and Sewer Commissioners may be taken as provided in Massachusetts General Laws Chapter 59 Section 64-65, inclusive.



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Special Permit

Testing of Fire System/Fire Flow Test

DATE:	
APPLICANT:	
Name:	
Address:	
Telephone:	
LOCATION OF TEST:	
REQUESTED DATE OF TEST:	

FEE*: \$ 500.00

- Tests must be conducted at night to minimize disturbance to the water system.
- Foxborough Water Department personnel must be on-site to supervise the test.
 - ** Should additional personnel be required to effectively conduct the test with minimal disruption to the Town's water system, the applicant must pay an additional charge at the appropriate overtime rate for that individual.*
- Results of the test are to be forwarded to the Foxborough Water Department.

Applicant Signature

Foxborough Water Dept.





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HYDRANT/OUTLET USE APPLICATION

DATE: _____

has applied to use a hydrant/outlet located at:

**Application is valid commencing _____ for an initial
fee of \$125.00. (Additional usage will be billed).**



Applicant Signature

Foxborough Water Dept.

**PLEASE NOTE: Water taken from this hydrant is for use in
FOXBOROUGH ONLY!**

HOURS OF USAGE: 7:30 A.M. to 3:30 P.M.
- Monday through Friday ONLY!!!

***** **START READ** _____ *****

***** **END READ** _____ *****

SIZE OF HOSE NEEDED: _____ "

Contact Person:
Timothy Daniels, Supervisor - (774) 306-1460



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Toilet Rebate Program

The Foxborough Water Department offers a toilet rebate program to help in the conservation of water. If you replace a high flow toilet with a low flow toilet, the Department will issue a check for \$100.00 in order to defray the expense of the replacement.

To verify the installation of this device, the Water Department will send a technician out to your home to check the old toilet coming out and the new toilet going in for compliance. When possible, we prefer to do this process on the same day. Please call for an appointment a day or two before the exchange takes place.