

Must be filed with.....within six months from date of Notice.

NAME OF BOARD MAKING ASSESSMENT

STATE TAX  
FORM 129

THE COMMONWEALTH OF MASSACHUSETTS

.....of.....

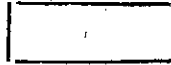
Received  
DO NOT WRITE IN THIS SPACE.

WARD..... PAGE..... LINE.....

**APPLICATION FOR ABATEMENT OF BETTERMENT TAX**

Sewer     Sidewalk     Street     Water

Mail to:  
DPW, 382 Falmouth Road  
Hyannis, MA 02601



To the Board.....  
Water Pollution Control Board  
NAME OF BOARD MAKING ASSESSMENT

NAME OF APPLICANT.....

POST-OFFICE ADDRESS.....

The above-named person aggrieved by a ..... BETTERMENT TAX hereby applies for an abatement.

NAME OF PERSON ASSESSED.....

Location and Description of Property— No. of Street, Plan, or Lot, and Area of Land.      Description must be sufficiently accurate to identify the premises.

Betterment..... Tax Assessed \$..... Amount Paid \$.....

Tax Paid by .....on .....

IF THE APPLICANT IS NOT THE PERSON ASSESSED, what is the applicant's interest in the property? .....

SPECIFY:

.....When was such interest acquired? .....

PRESENT OWNERSHIP, MORTGAGE OR WHAT OTHER INTEREST

DATE

Complete statement of reasons for this application: .....

**CONTENTIONS OF LAW RAISED**

SUBSCRIBED THIS.....day of....., ....., UNDER THE PENALTIES OF PERJURY.

SIGNATURE OF APPLICANT.....

NAME IN FULL

THE FILING OF THIS APPLICATION DOES NOT STAY THE COLLECTION OF YOUR TAX. IT SHOULD BE PAID AS ASSESSED. REFUND WILL FOLLOW IF ABATEMENT IS ALLOWED.

THIS FORM APPROVED BY THE DEPARTMENT OF REVENUE.