



TOWN OF SALISBURY

Department of Public Works
39 Lafayette Rd
Salisbury, MA 01952
(978) 462-7611

Town of Salisbury Water & Sewer Access Fee Determination and Acknowledgement

Applicant Name: _____ Contact Phone No. _____

Billing/Mailing Address: _____

Property Address: _____ Unit No. _____ Map _____ Lot _____

Current Property Use: _____

Proposed Project/Property Use: _____

No. Sewer EQRs Assigned: _____ No. EQRs for Which Betterment Was Paid _____

Official Use Only

New EQRs (based on proposed property use) _____ How calculated _____

No. EQRs For Which Sewer Betterment Was Paid _____

Water Access Fee (New EQRs less Betterment EQRs Paid times fee):

_____ less _____ times \$4,608 = \$ _____

Sewer Access Fee (New EQRs less Betterment EQRs Paid times fee):

_____ less _____ times \$500 = \$ _____

Town Official Signature: _____ Date: _____

Notes: _____

I acknowledge receipt of this preliminary access fee determination and agree to pay the fees assessed upon installation of water and/or sewer service and receipt of a Certificate of Use and Occupancy, if applicable.

Applicant Signature: _____ Date: _____

Collector Use Only

Access Fee Paid: Water: _____ Date: _____ Sewer: _____ Date: _____

Collector Signature: _____ Date: _____