

SEWER ACCOUNT APPLICATION



HINGHAM SEWER COMMISSION

25 Bare Cove Park Drive

Hingham, MA 02043

TEL: 781-741-1430

EMAIL: DPWADMIN@Hingham-MA.GOV

ACCOUNT # _____

SERVICE ADDRESS: _____

EFFECTIVE DATE: _____

LAST NAME: _____

FIRST NAME: _____

BUSINESS NAME: _____
(businesses only)

PHONE NUMBER: _____

MAILING/BILLING ADDRESS: _____

EMAIL: _____

As owner of the described premises, I hereby acknowledge and bind myself and any and all successors interest to abide by the Rules and Regulations of the Hingham Sewer Commission and to pay the sewer charges established when due. Payments received after the due date are subject to interest of 14%. Non-payment of the bill will constitute a lien (Section 16 & 27, Ch. 83, G.L.) on the property.

SIGNATURE OF PROPERTY OWNER: _____

DATE: _____