



TO THE UTILITY HEARING BOARD

I, _____, hereby appeal
(print full name)
the Finance Department's decision/determination described below
(attach a copy of the decision if in writing):

Leave blank for date stamp

Account Number: _____ Date of Decision/Action: _____

Property/subject address: _____

Water or sewer charge appealed or fee imposed: \$ _____

Bellingham Municipal Code Section(s) involved (if known): _____

Describe the errors or issues upon which the appeal is based, including an explanation of why the decision is not consistent with the Bellingham Municipal Code or other provision of law.

This appeal is based on the following (attach additional sheets if necessary):

Signature _____

Address _____

Home Phone _____ Other Phone _____