



City of Cambridge
 Claire Spinner, Treasurer
 Finance Department
 795 Massachusetts Ave.
 Cambridge, MA 02139

Office Hours

Monday 8:30 AM - 8:00 PM
 Tues. - Thurs. 8:30 AM - 5:00 PM
 Friday 8:30 AM - 12:00 PM

WATER/SEWER BILL

CUSTOMER COPY

Keep this portion for your records

PAYMENT IS DUE 30 DAYS FROM BILL DATE

Customer			Service Address					Meter #
VACCARO, DAVID AND LAETITIA			41 GRANVILLE RD					15897761
Bill Number	Bill Date	Due Date	Account Number			Parcel ID	# of Units	
1003469	03/31/2025	04/30/2025	01343700			233-131	2	
Description		Current Read Date	Previous Read Date	Current Meter Reading	Previous Meter Reading	Read Code	Usage	Charge
SEWER WATER		03/15/2025	12/15/2024	1522	1499	A	23	372.37
								82.37
Previous Balance		Payments, Credits & Adjusts		Interest		Current Charges		Total Due
517.08		-517.08		0.00		454.74		454.74

Block	Water	Sewer
10	\$3.55	\$16.07
100	\$3.79	\$16.99
500	\$4.03	\$18.26
2500	\$4.28	\$19.65
99999	\$4.65	\$20.89

*** READ CODE**

A = ACTUAL READ
 E = ESTIMATED READ
 F = FINAL READ
 M = MANUAL READ

If payment is not made by the due date, an interest charge of 14% per annum will be assessed on the unpaid balance from the bill date until the payment is received. Charges in CCF, 100 Cubic Foot, Approximately 750 Gallons.

For questions regarding payments contact the Finance Department at (617) 349-4220.

For questions regarding meter readings, change of address, final bills, and service calls contact the Water Department at (617) 349-4771.

Pay on-line at www.cambridgema.gov

Please see our website at <http://www.cambridgema.gov/water> for:

Information about PFAS in Cambridge water,
 The latest drought information, water conservation tips and
 MTU replacement for multiple estimated reads.

✂ Detach and return the portion below with your payment ✂



CAMBRIDGE WATER DEPT.

250 Fresh Pond Parkway
 Cambridge, MA 02138

WATER/SEWER BILL

REMIT PORTION

Make checks payable to: City of Cambridge, 795 Mass. Ave.,
 Finance Dept., Cambridge, MA 02139, or use the
 complimentary PO Box envelope provided. Please write bill # in
 the memo and enclose this bottom portion of the bill.

Bill Number	Bill Date	Account Number	Parcel ID	Due Date
1003469	03/31/2025	01343700	233-131	04/30/2025
Customer		Service Address		Total Due
VACCARO, DAVID AND LAETITIA		41 GRANVILLE RD		454.74

C6 CY6325

Amount Paid

\$

VACCARO, DAVID AND LAETITIA
 41 GRANVILLE RD
 CAMBRIDGE, MA 02138

NSF Check Charge: \$25.00 per account

00596042025501003469200000454744