



**City of Chelsea**  
**Office of the Treasurer/Collector**  
**City Hall, 500 Broadway**  
**Chelsea, Massachusetts 02150**

**Patrice Montefusco**  
**City Treasurer/Collector**  
**Phone: (617) 466-4240**  
**Fax: (617) 466-4249**

Customer Service Inquiry Form

Date: \_\_\_\_\_

Account #: \_\_\_\_\_

Property Location: \_\_\_\_\_

Name: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Type:    R/E    P/P    Excise    Parking    Water/Sewer    Trash    Other

Issue: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

<u>For Head Clerk Use Only:</u>	
Routed to Mgr. Of Customer Service & Collections	Date: _____
Screen Print attached: Yes/No	

<u>For Mgr. Of Customer Service &amp; Collections Use Only:</u>	
Routed to Mgr. Of Treasury	Date: _____
Routed to Mgr. Of Central Billing & Research	Date: _____

Date Resolved & Returned to Head Clerk: \_\_\_\_\_  
Customer Advised In Person: \_\_\_\_\_ Via phone: \_\_\_\_\_ or Letter \_\_\_\_\_  
Resolution:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Head Clerk Response Date Via Phone: \_\_\_\_\_