

Billing Appeal Form

Residential Life Student Services : 235 Whitmore Administration Building : (Ph) 413.545.2100 : (Fax) 413.545.1241

Name: _____ **Student ID # (8-digit):** _____

Address: _____ **Home Phone #:** _____

_____ **Cell Phone #:** _____

E-mail: _____ **Bill #: AH** _____

(For Damage Billing Appeal only)

Note: We will mail the decision letter to the address listed above. If the address is international, please provide an e-mail address which we can send the letter to.

Directions for completing a billing appeal:

1. The **student** must complete all information as requested on the first page of the form. Residential Life Student Services holds a contract with the UMass student. Parents and legal guardians may not complete this form in lieu of the student who holds the contract with Residential Life. Billing appeals that are not completed by the student will be returned to the address provided above.
2. The student must complete a personal statement including the following information:
 - a) The amount and type of charge you are appealing
 - b) The semester that the bill was originally charged
 - c) The reason(s) you believe the charge should be adjusted
3. Provide any additional documentation you have that will support your case or help us understand your particular situation. For more information regarding useful documentation please refer to the 'appealing a fee' section of <http://www.umass.edu/living/your-housing/housing-costs>.
4. Once you have completed this form, submit your Damage Billing Appeal directly to your Residential Service Desk. For all other billing appeals, please send to:

Residential Life Student Services
235 Whitmore Administration Building
181 Presidents Drive
Amherst, MA 01003-9313
5. Your appeal will be reviewed by the Administration and Customer Service Manager and a decision letter will be sent to the address listed above within 10 business days.
6. If you have questions about the appeal process or what information to include, contact Student Services at (413) 545-2100.

Student Signature: _____ **Date:** _____

Part I: Student's Personal Statement

Your personal statement is essential to this application. Please attach a personal statement including the following information:

- a) The amount and type of charge you are appealing
- b) The semester that the bill was originally charged
- c) The reason(s) you believe the charge should be adjusted

Part II: Documentation

Please provide any additional documentation you have that will support your case or help us understand your particular situation.

Residential Life Student Services Use Only

Name of Charge	Semester of Charge	Amount of Charge	Amount of Adjustment
Base Room Fee			
Recore fee			
Lockout Assistance			
Damage			
Temporary Access Card Replacement			
Cancellation Fee			
Early Arrival Fee			
Improper Room Checkout Fee			
Unauthorized Room Occupancy Fee (Blocked Room Fee)			
Other:			

Decision:

Date Appeal Received: _____