TOWN OF NORMAN WELLS

APPLICATION FOR CONNECT WATER &SEWERSERVICES

SERVICE POINT IDENTIFICATION and CLASSIFICATION: TYPE OF SERVICE (check only one)

☐ NON-GOVERNMENT	☐ RESIDENTIAL	☐ SECURITY DEPOSIT Residential - $ 200.00
☐ GOVERNMENT	☐ COMMERCIAL	☐ SECURITY DEPOSIT Commercial - $ 500.00

APPLICATION TO CONNECT: Minimum monthly charge applies **APPLICATION FEE** $50.00 WAIVED/TO BE BILLED

Street Address: _____ Account no: _____

Applicant's Name: _____

Mailing Address: _____ Postal Code: _____

Telephone: _____ Email Address: _____

Meter Deposit: Yes ☐ Waived ☐ Dog: Yes ☐ No ☐

RENTAL UNIT OWNER'S AGREEMENT TO GUARANTEE PAYMENT FOR SERVICE IS REQUIRED:

Property Owner: _____

Telephone Number: Home: _____ Work: _____

Mailing Address: _____ Postal Code: _____

Owner's Signature: _____

Please be advised that any outstanding Water Bills may be transferred to your tax account as per **By-law 25-10** which enables Municipal Corporation to collect outstanding Utility Bills. Section 9.1.b states: Services charges, fees and all other penalties and charges levied pursuant to this by-law shall form a charge on the lands or premises in respect to which municipal services are provided, subject to the same penalties and collectable in The same manner as taxes levied by the municipality in the year which the default occurred.

I hereby apply for water and sewer services to the premises described above and agree to pay for such services at the times and rates prescribed by the Town of Norman Wells. **Water and Sewer** billings will be calculated I estimated on a monthly basis, failure to receive a billing shall in no way affect the liability to pay the account. I agree to notify the Town of Norman Wells Immediately of any changes to my status or address and I will be liable for all charges until such notice is given.

Applicant's Signature: _____ Service Date Requested: _____

FOR OFFICE USE ONLY

Meter ID # :	Meter Size:
Route:	Stop Date:
Old Reading:	New Reading:
Date:	Date: