



Utility Service Application

for Water, Waste Water and Garbage Collection Services

Possession Date: _____ Service Address: _____

Applicant Name: _____

Telephone: _____ Email: _____

Co-Applicant Name: _____

Telephone: _____ Email: _____

Prior Account #: _____ Paperless Billing: Yes No

Mailing Address w/Postal Code (if different than above): _____

Would you like your contact information to be updated for the property tax associated to this service address? Yes No

Optional – If you wish a copy of the monthly invoice be sent to either the Tenant or the Property Manager, complete the following:

Tenant Information:

Tenant Name: (Last, First) _____

Tenant Mailing Address w/Postal Code _____

Tenant Date of Occupancy _____

Tenant Telephone and/or Tenant Email _____

Property Manager Information:

Property Manager Name: (Last, First) _____

Property Manager Mailing Address w/Postal Code _____

Property Manager Telephone _____

Property Manager Email _____

The undersigned hereby represents that he/she is the applicant or an authorized agent for the applicant, and that he/she has the authority to sign this contract for **Utility Services consisting of: water, waste water, garbage collection, recycling collection and landfill**. The applicant agrees to comply with all provisions of **Bylaw 16-2020**, including payment for all Utility Services supplied by the Town of Slave Lake to the above service address until such time as the applicant or authorized agent requests in writing that the contract be terminated. It is understood that in the event of late payment or non-payment, in addition to other remedies the Town of Slave Lake may have, the amount owing for utility services shall bear a penalty charge in accordance with the Municipal Government Act, Bylaw 16-2020 and that non-compliance with the provisions of said Bylaw may result in disconnection of utility services by the Town of Slave Lake. Deposits levied and paid in accordance with the Town of Slave Lake, **Bylaw 16-2020** will be retained for the duration of their Utility Service agreement with the Town of Slave Lake.

The applicant hereby agrees to abide by the terms and conditions specified in the Town of Slave Lake **Bylaw 16-2020**.

When there are changes, please allow for at least five business days prior to the change.

Signature of Applicant/Agent: _____ Date: _____

Signature of Co-Applicant: _____ Date: _____

The personal information requested in this form is being collected by Municipal Operation as required by the Town of Slave Lake, under the authority of the Freedom of Information and Protection of Privacy Act (FOIP act) Section 33 (c). If you have any questions about the collection or use of your personal information, contact the Town of Slave Lake FOIP coordinator at 780-849-8000.

Return in person, by fax 780-849-2633, or e-mail at utilities@slavelake.ca.