



Utilities Application

for Water, Waste Water and Garbage Collection Services

Possession Date: _____ **Service Address:** _____
Applicant Name: _____
Telephone: _____ **E-Mail:** _____
Co-Applicant Name: _____
Telephone: _____ **E-Mail:** _____
Prior Account # _____ **Pre-Authorized Payment:** Set-Up
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 billing be sent to either the Tenant or the Property Manager, complete the following:

Tenant Information:

Property Manager Information:

Tenant Name: (Last, First)	Property Manager Name: (Last, First)
Tenant Mailing Address w/Postal Code	Property Manager Mailing Address w/Postal Code
Tenant Date of Occupancy	Property Manager Telephone
Tenant Telephone and/or Tenant Email	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 even 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. The applicant acknowledges that the failure to receive or the loss of a utility invoice will not be accepted as a reason for non-payment. 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 or Agent: _____ Date: _____
 Signature of Co-Applicant: _____ Date: _____

The personal information requested on 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 utilities@slavelake.ca