

M.D. OF BIG LAKES

UTILITY SERVICING APPLICATION

Box 239 High Prairie, Alberta T0G 1E0
Phone (780)523-5955 Fax: (780)523-4227

NAME OF PROPERTY OWNER

LAST NAME		FIRST NAME	INITIAL
MAILING ADDRESS			
CITY/TOWN/VILLAGE			
POSTAL CODE	TELEPHONE (WORK)		TELEPHONE (HOME)

LEGAL DESCRIPTION OF PROPERTY

PLAN NUMBER	BLOCK	LOT	ROLL #	
QUARTER	SECTION	TOWNSHIP	RANGE	MERIDIAN
				W5

HAMLET/COOP

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GENERAL INFORMATION

- Property type for which I require water service: Residential Commercial/Industrial Farm
- Type of service(s) required: Water Sewer
- Date service required: _____

PROPERTY OWNER'S STATEMENT

As the owner of the property receiving or to be receiving water (and sewer) service, I understand that:

- * All water must be metered.
- * I am fully responsible for the service charge in the amount of \$_____.
- * I must notify the M.D. office of any service changes. (Address or Name changes.)
- * I am fully responsible for obtaining all required utility easements.
- * I am fully responsible for protecting any pertinences, including water meters on property from tampering or freezing.
- * I am fully responsible for ensuring all M.D. standard materials and installations have been met.
- * I am fully responsible for providing "as-built" information to the M.D. within 30 days following the utility service installation date.
- *The MD has the right to enter my property for the purpose of checking pertinences.
- *I agree to indemnify and save harmless the MD from claims and liability resulting from water service disruptions.

_____ Date

_____ Owner Signature

_____ Signature of Witness

FOR OFFICE USE ONLY

DATE RECEIVED: _____ DATE APPROVED: _____
DATE OF INSTALLATION: _____ DATE COMPLETED: _____
INSPECTED BY: _____ SIGNATURE: _____

NEW ACCOUNT:

ACCOUNT NO.	AMOUNT OF DEPOSIT	RECEIPT NO.	START READING

HOOK - UP AMOUNT	RECEIPT NO.	METER NUMBER

The personal information is collected for the purpose of Water and Sewer Hookups and is protected by the Freedom of Information and Protection of Privacy (FOIP) Act. If you have any questions about the collection, contact the Municipal District of Big Lakes FOIP Assistant at (780) 523-5955.