



UTILITY APPLICATION FORM



CONNECT



DISCONNECT



ACCOUNT UPDATES



TENANT COPY

TODAY'S DATE:

EFFECTIVE DATE:

PROPERTY OWNER / ACCOUNT HOLDER NAME:

Name(s) (as listed on Land Title) _____

Property Address: _____

Mailing Address: _____

Phone No: _____ Cell No: _____

Email : _____ opt in to e-billing ☐

Would you like to sign up for the Preauthorized payment plan for Taxes and / or Utility? Yes No

Do you need a Pet Licence ? YES NO

INITIALS

EMAILING AUTHORIZATION TERMS & CONDITIONS

I CONSENT THAT THE E-BILL FOR MY ABOVE ACCOUNTS WILL BE PROVIDED BY EMAIL, TO THE EMAIL ADDRESS LISTED ABOVE, AND I WILL NO LONGER RECEIVE A PAPER COPY. I UNDERSTAND THAT IT IS MY RESPONSIBILITY TO PROVIDE THE CORRECT EMAIL ADDRESS AND INFORM THE TOWN OF SUNDRE IN WRITING OF ANY CHANGES TO THIS EMAIL ADDRESS. I ALSO UNDERSTAND THAT A NON-RECEIPT OF MY E-BILLS IS NOT JUSTIFICATION FOR A LATE PAYMENT AND PENALTIES WILL NOT BE WAIVED AS A RESULT.

TENANT INFORMATION (THE ORIGINAL BILL WILL SENT TO PROPERTY OWNER/ TENANT(S) GET A DUPLICATE COPY)

TENANT NAME: _____ START BILLING DATE: _____

TENANT MAILING ADDRESS WITH POSTAL CODE: _____

TENANT PHONE NUMBER : _____ Remove Duplicate Billing ☐

Acknowledgement:

1. Regardless of the agreement to mail a duplicate bill, the undersigned shall continue to be directly responsible to the Town of Sundre for all rates, changes and other costs connected with providing water, sewer, gas and garbage services to the street address named above.
2. The undersigned understands that the if the account remains unpaid, the outstanding charges may be transferred to the property tax account respective of the service address described above and/or services will be discontinued.

Your personal information is being collected for the administration of utility accounts, for the purpose of collecting utility payments and may be disclosed to tenants or owners of properties in accordance with the Municipal Government Act and Section 4 of the Protection of Privacy Act (POPA). All personal information will be managed in compliance with the provisions of the POP Act. Questions about the collections of this information can be directed to the Town of Sundre POPA Coordinator at (403) 638-3551 or email: townmail@sundre.com

OWNER'S SIGNATURE (or Authorized Signatory Letter Provided)

Date:

Return form to townmail@sundre.com or the Town Office at P.O.Box 420 717 Main Ave West Sundre T0M1X0

OFFICE USE ONLY:

Account No.	Entered By.	Dated Entered.	Meter Reading.