Utilities Disconnection Form

DISCONNECTION DATE:	ACCOUNT #:
SITE INFORMATION	HAMLET/CO-OP:
LEGAL DESCRIPTION:	
QTR/LSD SEC TWP RGE W5M C	
RURAL ADDRESS SIGN:	OLL NUMBER:
FORWARDING ADDRESS	
LAST NAME:	
FORWARDING ADDRESS:	
TOWN:	PROVINCE: POSTAL CODE:
TELEPHONE:	ALTERNATE TELEPHONE:
DATE NOTIFIED: DISCONNECT:	TON REQUESTED BY:
	Please print name
Applicant's Signature	Witness Signature
OFFICE USE ONLY	
FINAL READING:	ACCOUNT #:
DEPOSIT AMOUNT:	DEPOSIT RECEIPT #:
AMOUNT APPLIED TO ACCOUNT:	BALANCE REMAINING:
COMMENTS:	
SERVICE CODES: Water	Sewer/Service Charges

The personal information on this form is being collected for the purpose of Water and Sewer Hookups/Disconnections under the authority of the Freedom of Information and Protection of Privacy (FOIP) Act and is protected by the FOIP Act. If you have any questions about the collection, contact the Big Lakes County FOIP Assistant at phone (780) 523 5955.

