



Water and Sewer Account Application

Full Name: _____
First Middle Initial Last

Business Name: _____
IF APPLICABLE

Civic Address: _____
Street Address Unit#

Mailing Address: _____
Street Address/Box # City Postal Code

Email Address: _____

Phone Number(s): _____
Cell Phone Home Work

Date of Birth: _____ Driver's License: _____
YYYY/MM/DD Number# Province

Move in Date: _____ House Apartment Business Mobile Home*
YYYY/MM/DD

*FOR MOBILE HOME PLEASE COMPLETE SCHEDULE B, BYLAW 18-14

OWN

RENT

Landlord Name: _____
Address/Phone # _____

\$ _____ Deposit Receipt # _____ A/R # _____

In signing this agreement, I do so authorize the Town of Kindersley to forward a copy of my utility bills to the registered owner of the property.

In signing this agreement, I am aware that water services will be automatically disconnected in the occurrence of consistent arrears. A reconnection fee will apply.

Billing Options: Please select ONE: Email (E-bill) Paper Copy (Canada Post)

Signature/Approval

Signature: _____ Date: _____

The Town of Kindersley is committed to protecting the privacy and confidentiality of personal information. All personal information that is collected by the Town is managed according to the Saskatchewan Local Authority Freedom of Information and Protection or Privacy Act.

For Office Use Only

Accepted this _____ day of _____, 20____ Work Order # _____

TOWN OF KINDERSLEY AUTHORIZED REPRESENTATIVE