

TOWN OF RAINBOW LAKE
UTILITY ACCOUNT DISCONNECTION FORM

Old Account No./Name on this Property: _____

1. Account No. _____ 2. Code: _____ F=To be billed for a part month
C=No more billings on this account
3. Account Name _____

Forwarding Address: _____

Telephone No. _____

4. Street Address _____ L _____ B _____ P _____

5. Date to be Disconnected: _____

6. Services to be Disconnected: Gas Water Sewer Garbage
(Garbage services cannot be removed from a residential account unless all services are finalized)

7. Gas Meter to be Removed (\$25.00 Charge) Fee Paid (Advise John or Wally)

8. Water Meter to be Removed (Advise John)

CUSTOMER STATEMENT

-I hereby authorized the Town of Rainbow Lake to disconnect the services on the above noted property as requested and hold the Town harmless for any damage caused to the property as a result of the disconnection of services.

-I shall be responsible for any charges to the said account until such time as the Town of Rainbow Lake disconnects the services on the above noted property if I have failed to provide the notice period required pursuant to the Town of Rainbow Lake's utility bylaw, and/or be responsible for the cost of responding to this disconnect request with less than the required notice.

- In the event that the gas meter and/or regulator has to be removed from the premises, I shall be responsible for the cost of removal pursuant to the Town of Rainbow Lake's utility bylaw.

APPLICANT

WITNESS

DATE

INTERNAL USE ONLY

Meter Reading: Gas _____ Water _____

6 Account Deposits Applied Date Applied: _____

6 Water Meter Deposit Refunded Date Refunded: _____
(This can only be done once Public Works has verified meter has been returned and/or is not damaged)

MISCELLANEOUS INFORMATION: _____

OFFICER'S CERTIFICATION:

I hereby certify that the service requested hereon has been turned off as required and/or the readings noted above are correct.

Signature: _____ Date: _____ Time: _____