



TOWN OF KAMSACK APPLICATION FOR WATER METER CONNECTION

Name of Person to Whom Utility is to be billed: _____

Street Address: _____

Box No. _____

Phone No. _____

Please provide an email address for E-Billing: _____

Size of Meter _____ Residential _____ Business _____ Industrial _____

Amount of Deposit _____

Meter Deposit at Present: YES/NO

If YES, Amount of Deposit _____

Additional Deposit Required _____

Connect Fee _____ TOTAL _____

When is the Connect Required: _____

Note: Someone must be in the home when the water is connected.

Phone number to call to meet us at the house: _____

Notes/Comments:

RECEIPT # _____

WALKSHEET# _____

ACCOUNT # _____

INSTALLATION READING _____

OWNER # _____

(over)

Complete if applicant is a renter:

Property Owner's Name: _____

How was property owner's consent received:

- via Email to **utilities.kamsack@sasktel.net** (attach)
- via Fax to **(306)542-2975** (attach)
- signature: _____

As a Renter your signature allows us to share your Utility Account information with the home owner.

Change of Owner:

How was the new owner verified:

- Copy of Offer to Purchase
- Copy of Change of Ownership
- Confirmed by Current Owner
 - Via email (attached)
 - Via signature _____
signature

Authorization:

I, _____ agree to use and pay for Water and Sanitary Sewer Service provided by the Town of Kamsack according to the rates established by the Utility Rates Bylaw. I further agree to adhere to the Utilities Management Bylaw and the Water and Sewer Connection & Maintenance Policy.

DATED THIS _____ DAY OF _____, _____

TIME: _____ AM/PM

Signature of Applicant or Authorized person