



OFFICE USE ONLY:  
UTILITY ACCOUNT NUMBER \_\_\_\_\_

Application to Connect / Disconnect Utilities

\_\_\_ MOVING IN (NEW BUILD : BINS REQUIRED \_\_\_)

\_\_\_ MOVING OUT

POSSESSION / MOVE OUT DATE

CIVIC ADDRESS of PROPERTY

REGISTERED PROPERTY OWNER

NAME of PROPERTY OWNER

CO-OWNER NAME (if applicable)

MAILING ADDRESS of PROPERTY OWNER (FORWARDING ADDRESS for DISCONNECTIONS)

OWNER PHONE NUMBER

OWNER EMAIL ADDRESS

IF YOU ARE RENTING

TENANT NAME

TENANT MAILING ADDRESS

TENANT PHONE NUMBER

TENANT EMAIL ADDRESS

EMAIL UTILITY BILL: YES \_\_\_ NO \_\_\_

IF YES PLEASE COMPLETE E-BILL AGREEMENT

PRE-AUTHORIZED UTILITY WITHDRAWL: YES \_\_\_ NO \_\_\_

IF YES PLEASE COMPLETE PRE AUTH APPLICATION

I/we, the undersigned, OWNER(s) of the property listed above. understand that I/we am/are responsible for outstanding balances on this Utility account, and that the Town of Crossfield may disconnect services or transfer outstanding balances to the Tax Account of this property if this account is in arrears.

OWNER SIGNATURE

TODAYS DATE