



273129 Sec Highway 520 West, PO Box 550, Claresholm, Alberta T0L 0T0
PHONE: 403-625-3351 / FAX: 403-625-3886

Application or Change for Utility Services

Submit Completed form to Utilities@mdwillowcreek.com

Property Information:

Service Address	
Legal Land Description / Lot Block Plan	
Tax Roll #	Utility Account #

Move In: ☐ _____ (YYYY / MM / DD) Move Out: ☐ _____ (YYYY / MM / DD)

Turn On: ☐ _____ (YYYY / MM / DD) Turn Off: ☐ _____ (YYYY / MM / DD)

Applicant Information:

Name of Applicant	
Mailing Address (If applicable, Forwarding Address)	
Telephone:	
E-mail:	
Other Contact Information:	

The M.D. of Willow Creek No. 26's Bylaw No. 1981, referred to as the "Utilities Bylaw" notes the following:

Section 18 (1) – The Owner of a Property shall apply for an Account with the MD, in a form acceptable to the MD, and pay all applicable fees as a condition of obtaining Utility Services, regardless of whether the provision of services requires installation of a new Service Connection(s) or construction of any new Facilities.

Section 21 (2) – Any charge on a Customer's Account remaining unpaid after the due date will be in arrears and constitute a debt owing to the MD and is recoverable by any or all of the following methods, namely:

- a) After 90 days by the Chief Administrative Officer adding the outstanding Account balance to the tax roll of an Owner of a Property in accordance with the *Municipal Government Act*.

As the owner(s) of the above-noted property, I (we) hereby consent to the above-noted tenant(s) receiving a copy of the M.D. of Willow Creek's utility bill. I (we) understand that any shortfalls on the part of the tenant(s) are my (our) responsibility. My (our) signature(s) below indicates my (our) consent to these terms.

The personal information on this form is collected under the authority of Alberta's Freedom of Information and Protection of Privacy Act Section 33 (c) for the administration and billing of water, solid waste, and recycling utilities in the Municipal District of Willow Creek. If you have any questions about the collection of this information, contact the FOIP Coordinator for the Municipal District of Willow Creek at 403-625-3351.

Name of Owner(s)

Name of Tenant(s)

Daytime Telephone No.

Daytime Telephone No.

E-Mail Address

E-Mail Address

Signature of Owner(s)

Signature of Tenant(s)

Signature of Owner(s)

Signature of Tenant(s)

Office Use Only:

	Service Description		Initial / Date
Public Works			
(Install New Meter, Read, Etc.)			
		Completed	
Utilities Clerk (Records updated)		Received	