



APPLICATION FOR WATER METER CONNECTION

ACCOUNT #

I/WE: (Person(s) to whom utility will be billed)

Of: (Street address)

(Mailing address)

(Phone)

REQUIRE connection as of:

AND HEREBY agree to use and pay for Water, Sewage & Garbage services provided by the Village of Pelly in accordance to the rates established by the Bylaws of the Village of Pelly.

DATED this ___ day of ___, 20___

SIGNATURE OF APPLICANT: (Or person authorized to sign on the Applicants behalf)

Amount of Deposit: (210-300-100)
Connect Fee: (420-850-120)
Total Due: (Receipt #)

OFFICE: OWNER # BILL CARD Village Initial: Connected: