

# Utility Application

Bylaw 001-2019

Property Information		
Service Address:	Possession Date:	Account #:

Property Owner Information			
Name:			
Mailing Address:			
City:	Province:	Postal Code:	
Phone #:	Email Address:	Receive bill by email? Yes                      No	
Signature:		Date:	

## Property Owner / Tenant Acknowledgment

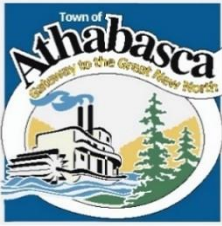
1. All new accounts are subject to a \$50.00 administration fee.
2. A registered Property Owner is not relieved from paying the applicable Utility Services Charges by reason of non-receipt of an invoice for that charge.
3. It is understood and agreed by the Property Owner that if the utility account remains unpaid, after the due date, a 3.5% penalty shall apply. A reminder letter will be sent and if they are still unpaid after an additional 10 (ten) business days, the outstanding balance plus a \$50.00 Administration Fee shall be transferred to the taxes as pursuant to the Municipal Government Act, Section 553.
4. The Property Owner Agrees to notify the Town office promptly when there are changes to the information herein.
5. Non-sufficient funds (NSF) charges in the amount \$40.00 per incident.
6. All regulations set out in Bylaw 001-2019, may be amended from time to time, are to be adhered to.

**Please submit completed form to:**

**Email:** [utilitybilling@athabasca.ca](mailto:utilitybilling@athabasca.ca)

**Mail:** 4705 49 Avenue  
Athabasca, AB  
T9S 1B7

**Fax:** 780-675-4242



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Optional - Information about any tenants of this property (Residential or Commercial) - If you wish to have the account put in the name Tenant and/or a copy of the monthly billing sent to the Property Manager, please complete the following:

Tenant Information			
Name:			
Mailing Address:			
City:	Province:	Postal Code:	
Phone #:	Email Address:	Receive bill by email? Yes                      No	
Signature:		Date:	

Property Manager Information			
Name:			
Mailing Address:			
City:	Province:	Postal Code:	
Phone #:	Email Address:	Receive bill by email? Yes                      No	
Signature:		Date:	

## OFFICE USE

Account Number: \_\_\_\_\_

Tax Roll Number: \_\_\_\_\_

RF#: \_\_\_\_\_