**Village of Bawlf**



**INACTIVE or HALF RATES UTILITY SERVICE APPLICATION**

|  |  |  |
| --- | --- | --- |
| Utility Account Number: | Street Address: | |
| Legal Description:  Lot(s): Block: Plan: | | |
| Owner’s Name(s): | | |
| Owner’s Mailing Address: | | |
| Owner’s Phone Number(s): | | |
| Start Date of Inactive Service: | | Estimated Date of Return: |

Inactive Service Criteria:

1. Owners are eligible to apply for Inactive Service Rates if the residence will be vacant or uninhabited for a minimum of three (3) months.
2. Owners must notify Administration at the Village Office upon return or new occupancy.
3. If the actual date of return is earlier than the estimated date of return, and this results in the inactive period being shorter than three (3) months, regular service rates will apply and the difference will be applied to the next utility invoice.
4. Note: the water supply will NOT be turned off during this period.

**This agreement shall be effective: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Signature of Property Owner Signature of Property Owner**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Print Name Print Name**

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**Approved By Village**