**Village of Bawlf**

**MUNICIPAL UTILITY SERVICE DISCONNECTION**

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| --- | --- |
| Utility Account Number: | Street Address: |
| Legal Description:  Lot(s): Block: Plan: | |
| Owner’s Name(s): | Disconnection Date: |
| Owner’s Mailing Address: | Owner’s New Mailing Address: |
| Owner’s Phone Number(s): | Owner’s New Phone Number(s): |

**Utility Service Disconnection Criteria:**

1. Any Arrears owing on this Utility Account are due and payable prior to the disconnection date entered above. Any unpaid amounts will be transferred to the property tax account and will be subject to the administration fees and penalties as per Bylaw #606/16.
2. The Owner(s) agree to provide a forwarding mailing address and phone numbers.

**Submitted to the Village Office: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Date**

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

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

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

**Print Name Print Name**

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**Approved By Village**

