

MUNICIPAL DISTRICT OF PEACE NO. 135

BULK WATER DISPENSING APPLICATION

CUSTOMER INFORMATION (PLEASE PRINT)

LAST NAME

FIRST NAME

MIDDLE INITIAL

BUSINESS NAME

MAILING ADDRESS

CITY/TOWN

PROV

POSTAL CODE

HOME PHONE

BUSINESS PHONE

CELL PHONE

EMAIL

GENERAL INFORMATION

1. IS YOUR RESIDENCE LOCATED WITHIN THE MD OF PEACE? YES _____ NO _____
2. IF YES, LEGAL DESCRIPTION OF LOCATION OF RESIDENCE: _____
3. **3 DIGIT ACCESS #:(MD Office will provide)** _____
4. **CUSTOMER 4 DIGIT PIN #:** _____
5. **CUSTOMER I.D.#(A/R ACCT.# FOR OFFICE USE)** _____

TERMS & CONDITIONS

Upon acceptance of the applicant as a customer, the customer will pay dispensing & maintenance fees as per the most recent version of the MD of Peace's Fees and Charges Bylaw.

The customer agrees that he/she and his/her servants and agents will use the truck fill facility and water at the said location entirely at their own risk.

As a customer receiving a PIN number and paying a \$50.00 non-refundable activation fee, I understand that I am fully responsible for any bulk water dispensing fee charged to my account.

SIGNATURE OF CUSTOMER

SIGNATURE OF WITNESS

DATE

RECEIPT #

COMMENCEMENT DATE

DISCONNECTION DATE

NOTES: