



Water/Sewer & Garbage Services

EFFECTIVE DATE: _____ New _____ Cancel _____ Transfer _____

STREET ADDRESS/UNIT NUMBER: _____

Current Resident of Unit & Mailing Address

New Resident of Unit & Mailing Address

Daytime Phone #: _____

Email Address: _____

(Contact information for the person who will receive invoices)

Are you a (check one) : Commercial User ___ Private User ___ Government User ___

I HEREBY AGREE TO THE FOLLOWING TERMS:

I HEREBY AGREE TO PAY FOR MONTHLY SERVICES RECEIVED FOR WATER/SEWER AND GARBAGE PICK-UP WITHIN THIRTY (30) DAYS OF INVOICING DATE AND WILL NOTIFY THE HAMLET OF CAMBRIDGE BAY OF ANY CHANGES. I AGREE TO PAY A 2% MONTHLY INTEREST CHARGE ON ANY OUTSTANDING BALANCES OWED.

CURRENT RESIDENT OF PROPERTY MUST NOTIFY THE HAMLET OF CAMBRIDGE BAY WHEN A TENANT MOVES OUT OF THE SERVICE LOCATION. IF SUCH NOTICE IS NOT GIVEN, THEN THE **OWNER** AGREES TO PAY FOR ALL SERVICE FEES INCURRED AT THIS SERVICE LOCATION AFTER THE TENANT MOVES OUT.

I HEREBY AGREE TO PAY A \$150.00 REFUNDABLE DEPOSIT TO THE HAMLET OF CAMBRIDGE BAY.

CURRENT RESIDENT SIGNATURE: _____

NEW RESIDENT SIGNATURE: _____

Date: Year _____ Month _____ Day _____

FOR FINANCE USE ONLY:

APPROVED BY: _____

CUSTOMER ACCOUNT NUMBER:
CUSTOMER HAS BEEN ENTERED/UPDATED IN ACCPAC SYSTEM?
CUSTOMER HAS BEEN ENTERED/UPDATED IN OUR FLUID MANAGER SYSTEM?
CUSTOMER HAS BEEN ADDED TO WS/GARBAGE SCHEDULES?
CUSTOMER HAS PAID DEPOSIT? (ATTACH RECEIPT)