



## UTILITY CHANGE REQUEST FORM

### COMPLETE FOR NEW ACCOUNT

<b>UTILITY ACCOUNT #</b>				
New Owner Name - 1		Opening Date:		
New Owner Name - 2				
Civic Address:		Lot:	Blk:	Plan:
Current Mailing Address:				
Home Phone:		Email Address:		
Owner 1 Cell Phone:		Email Billing: <input type="checkbox"/> YES <input type="checkbox"/> NO		
Owner 1 Work Phone:		Office Use Only		
Owner 2 Cell Phone:		Account Opened Date:		Initial:
Owner 2 Work Phone:		Billed:	M/C deposit:	New Acct:

### COMPLETE FOR COPY OF BILL (RENTAL)

<b>UTILITY ACCOUNT #</b>				
Tenant Name - 1		Tenancy Date:	1st Day:	Last Day:
Tenant Name - 2				
Civic Address:		Lot:	Blk:	Plan:
Current Mailing Address:				
Home Phone:		Email Address:		
Tenant 1 Cell Phone:		Email Billing: <input type="checkbox"/> YES <input type="checkbox"/> NO		
Tenant 1 Work Phone:		Office Use Only		
Tenant 2 Cell Phone:		Account Opened Date:		Initial:
Tenant 2 Work Phone:				

### COMPLETE IF CLOSING ACCOUNT

<b>UTILITY ACCOUNT #</b>				
Prev. Owner Name - 1		Closing Date:		
Prev. Owner Name - 2				
Civic Address:		Lot:	Blk:	Plan:
Current Mailing Address:				
Home Phone:		Email Address:		
Owner 1 Cell Phone:				
Owner 1 Work Phone:		Office Use Only		
Owner 2 Cell Phone:		Account Closed Date:		Initial:
Owner 2 Work Phone:				



## UTILITY CHANGES

Existing Account #:	New Account #:	
Meter Reading:	Date:	
Credit Adjustment Required:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Master Card Refunded:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Delete Current <b>PAP</b> :	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Add Buyer PAP:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Add Tenant PAP:	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<b>PAP</b> stands for <b>Pre Authorized Payments</b> . To be set up for <b>PAP</b> , we require a void cheque or a direct deposit slip from your bank.		

COMMENTS:

Received by:	Date:

Signature of Seller: \_\_\_\_\_

Signature of Buyer: \_\_\_\_\_

Signature of Tenant: \_\_\_\_\_

Signature of Property Management Representative: \_\_\_\_\_

(one of these signatures is required)