Town of High Prairie Utility Set Up

In Date Notified:		Account #	
Owner / Renter Name:			
Mailing Address			
Phone Numbers Home:	email address:		
Work:	Dogs Yes	No - If Yes # of Dogs	
Cell:	Civic Address		
Deposit Paid Yes No Date Paid:_	Requested Rea	ding Date:	
Gas:	H.P.# Route #	Water:	
Customer Signature:			
Out Date Notified:		Account #	
Owner / Renter Name:			
Mailing Address			
Phone Number Home:			
Cell:	Civic Address		
Requested Reading Date:			
Gas:	H.P.#	Water:	
Customer Signature:	Route #		
-		Recorded By:	

Information collected is subject to section 33(2) of the FOIP Act for purposes of operation by the Municipality.