

TOWN OF FOX CREEK UTILITY ACCOUNT APPLICATION

Phone: 780-622-3896 Fax: 780-622-4247

email: scottm@foxcreek.ca

Civic Address:		1 211
Applicant Name:		•
Legal Possession Date for change of ownersh	iip:	, 20
Mailing Address (if different):		
	×	444
Home Phone:	Cell Phone:	
Email(s)*:		
Property Owner Name (as shown on Land Title		
Property Owner Phone (if different than applic	cant):	
teason for Utility Account Application	Di con di con la contra di	
Jew Meter Install Required (New Build)	Please check applicable	
lew Primary Residence		
Commercial/Industrial Owner Commercial/Industrial Rental		
ommercial/moustrial Kental		
DDU G ANT CIGNATURE		
PPLICANT SIGNATURE	DATE	
	FFICE USE ONLY	
Initial Meter Reading: Property Owner Name on Land Title:	Tax Roll: Account No:	
	Customer ID No.	
Notes:		