

## **APPLICATION**

Acct.		

I/WE:				
	(Person(s) to whom utility will be billed)			
Of:				
	(Street address)	(Street address)		
	(Mailing address)  (Phone)			
REQUIRE	connection as of:			
AND HEREBY agree to use and pay for Water, Sewage & Garbage services provided by the Village of Pelly in accordance to the rates established by the Bylaws of the Village of Pelly.  I/WE is/are the legal owner of this propertyYes No If checking No, I/we hereby consent that the status of my utility account may be disclosed at any time to the property owner.				
DATED th	nis day of	, 20		
	RE OF APPLICANT:			
(Or perso Applicant	on authorized to sign on the ts behelf)			
,	Amount of Deposit:	(210-300-100)		
	Connect Fee:	(420-850-120)		
	Total Due:	(Receipt #)		
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