

Signature of Applicant

Request for New Service

Application Form

- 1. To ensure your application can be processed, please complete all sections of this form.
- 2. Questions can be directed to the Town of Fort Qu'Appelle by phone at (306) 332-5266 or e-mail forttown@sasktel.net.

Please Note: There is a \$20.00 non-refundable connection fee due with application. A refundable deposit of \$355.95 is also due upon connection. This deposit will be returned to you at the time the account is closed provided the account has been paid in full. Total Deposit of \$375.95

Customer Information	n:	·				
Last Name, First Name						
Identification (license or						
health care card numbe	er)					
Mailing Address						
Fort Qu'Appelle Service Location Information:						
Street Address						
Suite/Apartment						
Effective ON Date						
Owner/Renter						
Is this property: R	Residentia	ı <mark>l</mark> 🗆	Comme	ercial 🗆	Home-based business	
Contact Information:						
Telephone (the number you are						
available at during regul	lar business					
hours.)						
Cell Phone						
E-mail						
Alternate Contact Information:						
Last Name, First Name						
Telephone						
E-mail						
Relationship to you						
Please check to approve disclosure of your account information to the individual identified as						
the alternate contact.						
Applicant's Declaration	on:					
In signing this form, you are declaring						
 this information to be true and complete to the best of your knowledge; and 						
 you consent to receiving communication from the Town of Fort Qu'Appelle by e-mail 						

Date