



# Commercial Rental Water, Sewer and Garbage Application

Service Address: \_\_\_\_\_ Effective Date: \_\_\_\_\_

**REQUIREMENTS FOR UTILITY SERVICE:**

All Commercial Renters are required to pay a deposit prior to an account being transferred to their name.

- Initial Commercial Deposit: A deposit equal to 3 months of estimated billing charges or amount deemed necessary. **A minimum of \$300 is required.**
- Only the contacts listed on the application will be able to inquire about the account. However, all tenants must consent to the City releasing their utility account payment history to the landlord.
- A lease agreement must be provided or a letter in writing from their landlord with address, date, tenants and signature.
- A valid City of Camrose Business license is required to operate within the City.

Applicant(s): \_\_\_\_\_

Photo ID: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Payment of current billings must be received by the due date. Past due amounts are subject to a 1.5% penalty. **Water service will be shut off 7 days past the due date to those receiving a second arrears billing. Notice will be printed on your invoice.** \_\_\_\_\_ (Initials)

I hereby accept responsibility to pay the account at the above address until such time that I contact the City of Camrose to have my utility services disconnected. If the account is closed and the balance is not paid, it will be sent collections. In signing this form, I am declaring this information to be true and complete to the best of my knowledge.

\_\_\_\_\_  
Signature of Applicant(s)

\_\_\_\_\_  
Date

The information contained on this form is collected under the authority of *the Freedom of Information and Protection of Privacy Act* and shall only be used for the purpose for which it was collected.

**OFFICE USE ONLY:**

Accepted By: \_\_\_\_\_ Account Number \_\_\_\_\_

Cycle \_\_\_\_\_ Rte \_\_\_\_\_ Seq \_\_\_\_\_ Tax Roll # \_\_\_\_\_ Service Application # \_\_\_\_\_

ID# \_\_\_\_\_ Read \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_

WO# \_\_\_\_\_ By \_\_\_\_\_ Date \_\_\_\_\_