



Please return form to:
 City of Beaumont - Utilities
 5600 - 49 Street
 Beaumont AB T4X 1A1
 Phone: 780-929-1351
 Fax: 780-929-8729
 Email: utilities@beaumont.ab.ca

MOVE IN

Water/Sewer Account and Curbside Collection

SECTION 1 - SERVICE ADDRESS INFORMATION			
Purchased Home? Yes <input type="checkbox"/> No <input type="checkbox"/> If NO, please be aware that all utility accounts must be in property title owner's name. If property is a rental, please have property owner fill out rental application.			
Move in Date:		Service Address:	
Utility Account No: Internal Use Only		Beaumont AB	Postal Code:
A \$50.00 Connection/Administration Fee will be charged on your first bill.			
SECTION 2 - HOMEOWNER(S) INFORMATION			
Name:		Name:	
Home Phone:		Home Phone:	
Work/Cell Phone:		Work/Cell Phone:	
Customer No: Internal Use Only		Customer No: Internal Use Only	
SECTION 4 - E-BILLING SIGNUP			
Would you like to sign up for e-billing? Utilities <input type="checkbox"/> Taxes <input type="checkbox"/>		When you sign up for e-billing, you will receive your bills and notices through your email account. Please provide us with your email address and you will automatically receive your bills via email!	
		Email Address:	
SECTION 3 - WELCOME WAGON			
Welcome Wagon Ltd. is a community-based service which welcomes new arrivals with information on local businesses and services. Welcome Wagon is an external agency, separate from the City of Beaumont. I authorize the City of Beaumont to release the personal information contained within to the Welcome Wagon representative so that I can be provided with a free Welcome Wagon visit.			
Yes <input type="checkbox"/> No <input type="checkbox"/>		Email Address: _____	
OTHER CITY APPLICATIONS YOU MAY NEED			
Pre-Authorized Payments (PAP) for: Property Taxes and Utility Account Applications		Pet License Application Business License Application	
SECTION 4 - AUTHORIZATION			
We/I, the registered Owner(s) of the above service address understand we/I are responsible for the Utility Bills. Non-payment of the Utility Bills will result in either disconnection and/or transfer of outstanding balances to your tax account pursuant to City Bylaws.			
We/ I certify that the information given on this form is true and complete to the best of my knowledge and acknowledge my authorization of the information to be used for the purposes identified above.			
Registered Owner Signature: _____ <small>(print name here)</small>			Date:
Registered Owner Signature: _____ <small>(print name here)</small>			Date:
<small>The personal information requested on this form is being collected under the authority of Section 33(c) of the Freedom of Information and Protection of Privacy (FOIP) Act. The information collected will be used for the purpose of managing and administering Waste Management and Utility Account Services and other purposes as set out above. If you have any questions about the collection or use of your personal information, contact the City of Beaumont's FOIP Coordinator at 5600-49th Street, Beaumont, Alberta, T4X 1A1 or 780.929.8782.</small>			
FOR OFFICE USE ONLY			
Cart Ordered <input type="checkbox"/>	Requested Read/Meter <input type="checkbox"/>	Meter Installed <input type="checkbox"/>	Route:
Date:	Date:	Date:	Sequence: