THE CITY OF FLIN FLON

Request to Change Utility Billing Charges



"STOPS and STARTS"

			velling Units only. Iulti-Suites are NOT	eligible
Please print c				
Zone: ¹□	2□	3□	5□(Channing)	6□(Trailer Court)
Name:				
Utility Account Nur	mber:			
Telephone Numbe	r:			
I hereby make app	olication to have	<u>ve my Wa</u>	ter & Sewer Billin	g Charges:
Stopped \$93	3.98 *administration fee		Started	
RECEIPT NO.:		**	MUST PROVIDE STAR	RT DATE/TENTATIVE START DATE
From:		**	'То:	
EXACT DATES	MUST BE II	NDICAT	ED FOR BOTH	THE STOP AND START
For my home lo	_		(House Numbe	er & Street)
Reason for Reque	st to Change l	Jtility Bill	ing Charges (i.e. va	acant, away for winter, etc.):
		_		
Date			Applicant's Signa	ature
	ORIG	SINAL TO TA	XX & UTILITIES COORE	DINATOR
OFFICE (PROC			Y:	Charges:
Deactivated Date:	Completed By:	On:		Opening balance:
STOP water Service Charge applied:	e Completed By:	On:		\$ Unbilled *months prior to STOP: JAN FEB MAR APR MAY JUN JULY AUG SEPT
\$				OCT NOV DEC
Reactivated Date:	Completed By:	On:		Stop Fee: \$93.98
Other Info.:				Total Charges:

Reactivated:

RATE RIDER Deactivated: \$