



P.O. Box 60
Heisler AB, TOB 2A0

Phone: 780-889-3774

Fax: 780-889-2280

Email: administration@villageofheisler.ca

SERVICE REQUEST FORM

Name: _____ Utility Acct No.: _____

Street Address: _____

Phone Number: _____

Mailing Address: _____

Name of Renter (if applicable): _____

Name of New Owner (if applicable): _____

NOTE: In the case of a renter where the renter will be responsible for the utilities, the bills will remain in the owner's name. The owner remains responsible for any arrears. A copy of the utility bill may be sent to the renter, if requested.

Type of Request: _____	Grass or Snow Removal
_____	Connect All Services
_____	Disconnect
_____	Other: _____

Price of services \$ _____

Net bills will be payable thirty-(30) days from the date of the invoice. Accounts not paid on or before this date shall incur a penalty of 2.5% as per Policy #1208. Payments may be made at the Village Office or by mail.

Request Authorized by: _____

Effective Date: _____

Signed on behalf of Village of Heisler: _____

By signing this document the above mentioned person or organization recognizes that the Village of Heisler will not be responsible for any damages, cost or losses incurred to the person or organization as a result of the above mentioned service. The person or organization, by signing this document agrees to pay the above mentioned price for services and gives the Village of Heisler the right to collect the amount by any legal means.