



Customer Move-Out for Municipal Water & Sewer Services

Account Information

Move out date (mm/dd/yyyy):

Account Number: 1348

Account Holders:

Service Address:

Please indicate if you are the tenant or owner of the property: Tenant Owner

Forwarding Address

Address:

City:

Province:

Postal Code:

Phone Number:

Contract Agreement

I/we hereby apply to the Town of Parry Sound to stop billing me/us for municipal water and sewer services at the address noted above, as of the date noted. I/we agree to pay for the services up to the move out date, including any fees as outlined in the Town's municipal by-laws regarding such services.

I/we hereby consent to the above noted items.

Signature of Account Holder:

Date:

For Office Use Only

Water to be turned off?

Final meter read required?

PW notified: