

TOWNSHIP OF HAVELOCK-BELMONT-METHUEN
MUNICIPAL WATER/SEWER ACCOUNT
TENANT REGISTRATION FORM

Name(s): _____

Mailing Address: _____

Property Address: _____ Unit # or Apt # _____

City: _____ Prov _____ Postal Code _____

Phone Number:(Home) _____ (Work) _____

Driver's License Number _____

Deposit amount paid: _____ Receipt Number _____

Social Insurance Number: _____

(This number will be used only if the account is sent to an outside agency for the purposes of collection.)

The tenant(s) acknowledges that it is their responsibility to keep the water/sewer account in good standing. The deposit will be returned in full when the municipality is notified that the tenant is moving out and the account is paid in full. Failure to make payment in full will result in the deposit being applied toward the account and any outstanding balance will be the responsibility of the tenant.

Signature (Tenant)

Date

Signature (Tenant)

Date

Signature (Municipal Representative)

Date

The information collected on this form will be used solely by the Water & Sewer Department for the purposes of establishing a water/sewer account.