



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.			
Possession Date:		Service Address:	
Utility Account No: Internal Use Only	Beaumont AB	Postal Code:	
A \$150.00 Connection/Administration fee will be charged on your first bill.			
SECTION 2 - HOMEOWNER(S) INFORMATION			
Legal Name:		Legal Name:	
Home Phone:		Home Phone:	
Work/Cell Phone:		Work/Cell Phone:	
Email:		Email:	
Customer No: Internal Use Only		Customer No: Internal Use Only	
SECTION 3 - E-BILLING SIGNUP			
Would you like to sign up for e-billing?		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.	
Utilities <input type="checkbox"/> Taxes <input type="checkbox"/>		Email Address:	(print legibly)
OTHER CITY FORMS THAT YOU MAY BE INTERESTED IN OR REQUIRE			
Interested in automatic withdrawals the City offers. For this service, please complete the Pre-Authorized Payments for Property Taxes and Utility Accounts form		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:			Date:
Registered Owner Signature:			Date:
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 setting up, managing and administering your account with the City of Beaumont and may be communicated to relevant City Business Units. 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.			
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: