



EAST HANTS

WATER UTILITY CONNECTION APPLICATION FORM

Address: Box 230, Suite 170, 15 Commerce Court, Elmsdale, NS, B2S 3K5 Phone: (902) 883-2299 Toll Free: 1-866-758-2299
Email completed form to: waterbilling@easthants.ca easthants.ca

Date Requested for:		PLEASE NOTE THAT WATER ACCOUNTS MUST BE IN THE OWNER'S NAME (NOT TENANTS)	
Property Owner First Name/Business Name (if applicable)		Middle Name	Last Name
Telephone Number			
Email		Cell Number	
Additional Owner First Name		Middle Name	Last Name
Email		Cell Number	
Civic Number / Street Name		Lot #	
Mailing Address			
Number of Persons Occupying House (including children):		Is this a rental property?	YES NO
Have you ever had a water account with us before: YES NO		If yes, please advise address of previous water account:	
Requested By		Date	
Contact Name in case of Emergency; someone other than occupant(s):		Relationship:	Contact Number:
<p>Please Note</p> <p>Administration Fees (These will appear as a balance forward on your first bill): The Utility will charge a \$25.00 fee for the creation of a water account, notwithstanding the fact that no physical disconnection of the system may have occurred.</p> <p>The Utility will charge a \$40.00 fee for the installation of a water meter or the inspection thereof during normal working hours. The fee shall be \$200.00 when a meter is installed, or inspection performed, AFTER normal working hours of the utility. Please Note: Installation of water meters occur weekly on Fridays.</p> <p>Missed Appointment Fee: When an appointment has been made by a customer to have water service connected, a meter installed, or another visit to the property for the inception or maintenance of water service and the customer fails to keep the appointment or the plumbing is not completed to allow for installation of a water meter, requiring staff to return to the property, there may be a charge of \$40.00 for each visit missed.</p>			
WATER DEPARTMENT USE ONLY			
Date Meter Installed: _____		Contract Acct: _____	
Meter Size: 5/8" 3/4" 1" 2" 3" 4"		Conn Obj: _____	
Installation: _____		Premise: _____	
Old Reading: _____		New: _____	
Device Number: _____		ID Number: _____	
Device Location: _____		Installation Fee: _____	
Admin Fee Add: _____			

NEW SERVICE

NAME CHANGE