

**HERITAGE POINTE**  
 Corix Utilities (Foothills Water) Inc.  
 PO Box 20217  
 Kelowna, BC V1Y 9H2  
 Phone: 1-877-577-2112  
 Fax: 250-707-0349  
 Email: customercare@corix.com



## APPLICATION FOR SERVICE

Account Number (Office Use Only):		
<b>Customer Information</b>		
Name:		Date of Birth:
Additional Name on Account:		Date of Birth:
Mailing Address:		City:
Province:	Postal Code:	Email:
Home Phone:	Cell Phone:	Emergency Contact:
<b>Service Location Address (Location where we will be providing service)</b>		
Service Address:		Possession Date:
<b>If Premises is Rented or Leased</b>		
Owner Name:		Phone:
Owner Mailing Address:		City:
Province:	Postal Code:	Other Telephone:
<b>Utility Services Required (Office Use Only)</b>		
Water:		Sanitary Sewer:
Billing Start Date (Office Use Only):		Billing Start Date (Office Use Only):
<b>Termination (Office Use Only)</b>		
Reason for termination:	New Application Received	Seasonal Disconnect
		Non-Payment of Utilities
		Termination Requested
Date to Terminate On:		
<b>Agreement</b>		
<p>I/WE AFFIRM THAT THE INFORMATION CONTAINED IN THIS APPLICATION IS CORRECT AND I/WE UNDERSTAND THAT THE TERMS OF SERVICE REQUIRE PAYMENT IN FULL OF ALL ACCOUNTS WITHIN 21 DAYS (UNLESS OTHERWISE STATED IN WRITING) OF INVOICE DATE AND I/WE UNDERSTAND THAT INTEREST ON OVERDUE ACCOUNTS SHALL BE AT THE RATE STIPULATED ON THE INVOICE OR IF NO RATE IS STIPULATED AT A RATE EQUAL TO THE LESSOR OF 1.5% PER MONTH (19.6% COMPOUNDED ANNUALLY) AND THE MAXIMUM LEGAL INTEREST RATE ALLOWABLE. THE APPLICANT(S) CONSENT(S) TO CORIX (1) USING THE APPLICANT'S PERSONAL INFORMATION (INCLUDING FINANCIALLY-RELATED INFORMATION) WHEN IT IS NECESSARY IN ORDER TO SERVE THE APPLICANT AS A CUSTOMER, TO MEET LEGAL AND REGULATORY REQUIREMENTS, AND FOR INTERNAL AUDIT, STATISTICAL AND RECORD-KEEPING PURPOSES; AND (2) OBTAINING ANY REPORTS, INCLUDING ANY CREDIT, BACKGROUND AND OTHER PERSONAL INFORMATION ABOUT APPLICANT THAT CORIX DEEMS NECESSARY FROM ANY THIRD PARTIES INCLUDING CREDIT BUREAUS AND REPORTING AGENCIES OR OTHER CREDIT GRANTORS, AND CONSENTS TO THE DISCLOSURE AND EXCHANGE OF SUCH INFORMATION BY AND AMONG CORIX AND SUCH THIRD PARTIES (INCLUDING CREDIT AGENCIES AND BUREAUS AND OTHER CREDIT GRANTORS) FOR THE PURPOSES OF EVALUATING THE APPLICANT'S ELIGIBILITY FOR SERVICES THAT ARE REQUESTED BY APPLICANT.</p> <p>THE UNDERSIGNED, BY APPLYING FOR SERVICE AND SIGNING THIS APPLICATION, ACKNOWLEDGES AN OBLIGATION TO PAY FOR SERVICES PROVIDED BY CORIX IN ACCORDANCE WITH THIS APPLICATION AND ALL APPLICABLE TERMS AND CONDITIONS AND RATES AND CHARGES AND TO BE BOUND BY AND COMPLY WITH ALL APPLICABLE TERMS AND CONDITIONS AND RATES AND CHARGES AS AMENDED OR REPEALED FROM TIME TO TIME AND AVAILABLE FOR INSPECTION AT CORIX'S OFFICE IN CALGARY, ALBERTA.</p>		
Date:	Name:	Signature: