## **Final Water Read Request Form**

Personal information collected on this form is collected under the authority of the Municipal Act, 2001, as amended, for the purposes of reviewing this application. Questions regarding the collection of personal information should be directed to the Municipality of West Perth, 169 St.David Street, PO Box 609, Mitchell, ON N0K 1N0, telephone 519-348-8429 Clerk's Department.

Please complete the form below to request your final water reading.

**Note** your final water meter read request must include a forwarding address and your contact information, otherwise your request will not be processed.

#### Water Account Number\*

#### First & Last Name \*

### Service Address

#### Service Address \*

Apt/Unit Number

Postal Code \*

#### City/Town \*

**PO Box** 



## **Forwarding Address**

Forwarding Address \*

City/Town \*

Apt/Unit Number	Postal Code *	PO Box	
New Occupant Name *			
			,
Effective Date *			

### Please provide your phone number or email address to allow staff to acknowledge receipt of your entry. \*

# Thank You

You will receive a confirmation of your request by return email or phone call.