Box 160
Chauvin, Alberta T0B 0V0
Phone: 780-858-3881
Email: info@villageofchauvin.com
www.villageofchauvin.com

UTILITY DISCONNECTION FORM

Application Information:

Property Owner Name: _____

Mailing Address: _____

Residence Phone Number: _____ Cell Number: _____

Email Address: _____

I _____ requests that the Village of Chauvin disconnect the following services:
(print name)

Water ☐ Gas ☐ (check applicable) on utility account # _____ at the service address of _____ in the Village of Chauvin.
(physical address)

Effective Date: _____

- I acknowledge that the property owner will continue to pay for any applicable service charges as per the Village of Chauvin Utility Rates Bylaw.
- It is the responsibility of the property owner to ensure their residence is properly secured for a utility service being disconnected ie: water lines drained, residence winterized.
- I acknowledge that by having the above service disconnected, the Village of Chauvin is not liable for any damage that may occur as a result of the utility service being disconnected.

Signature of Applicant: _____ Date: _____

MUNICIPAL STAFF USE ONLY

Signature: _____ Date: _____

Final Meter Reading

GAS: _____ WATER: _____