



**RESIDENTIAL
DISTRIBUTION SERVICES AGREEMENT**
Please complete and return within 10 business days

Account No.: _____ Effective Date: _____

Part 1 – To Be Completed by All Applicants

Date: _____

Mr. _____
Mrs. _____
Ms. _____ (Last) _____ (First) _____ (Initial)

Service Address: _____ (No.) _____ (Street) _____ Postal Code: _____
Apt. No.: _____ Owner: _____ Tenant: _____

Phone: (_____) _____ (Residence) (_____) _____ (Business)

Employer: _____

I would like my bills sent to the above address _____ OR:

Mailing Address: _____ (No.) _____ (Street) _____ Apt/Unit No.: _____

City/Town: _____ Postal Code: _____

Applicant's Spouse or Co-occupant: _____ (Last Name) _____ (First) Phone: (_____) _____

Part 2 - To Be Completed By Tenants

Owner's Name: _____

Address: _____ (No.) _____ (Street) _____ (City/Town)

Part 3 – To Be Completed By Existing and Former Customers

Previous Service Address: _____ (No.) _____ (Street)

Part 4 – Applicant's Acknowledgement

I agree to accept Distribution Services from Newmarket Hydro in accordance with its Conditions of Service and be bound by them as they exist and may be amended from time to time. I also agree to the terms and conditions of billings for municipal water and wastewater services established by the Town of Newmarket.

Signature: _____ Co-Applicant: _____

Newmarket Hydro Conditions of Service are available for review at our offices at 590 Steven Court, on our web site at www.nmhydro.on.ca or in hard copy at a cost of \$172.49 plus applicable taxes.