

Rural Municipality of Riding Mountain West

UTILITY: ADD / CHANGE / DELETE

(PLEASE COMPLETE THIS FORM IN ALL CAPS TO AVOID ERRORS)

*Please only fill in the section that pertains to you

MOVING IN:

Name(s): _____

Mailing Address: _____

Civic Address: _____

Possession Date: _____ / _____ /20____.
(DD) (MM) (YYYY)

Property Owner: Yes / No .
(circle one)

Phone: _____

Email: _____

Additional Info: _____

MOVING OUT:

Name(s): _____

Mailing Address: _____

Civic Address: _____

Final Meter Reading Date: _____ / _____ /20____.
(DD) (MM) (YYYY)

Phone: _____

Email: _____

Forwarding Address if Applicable: _____

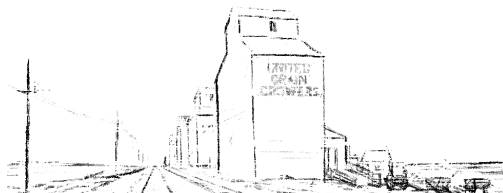
Office Use Only

Processed By: _____

Date: _____ / _____ / _____

Meter Reading: _____

info@rmwest.ca
www.rmwest.ca



118 Main Street
Box 110
Inglis, MB R0J 0X0
Ph: 204-564-2589
Fax: 204-564-2643