



The Corporation of the Town of Lakeshore
419 Notre Dame Street
Belle River, Ontario, N0R 1A0
519-728-2700; 1-877-249-3367
Fax 519-728-9530

Request For Water Shut Off /Turn On

Service Address:

Utility Account Number:

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Customer Name:

Mailing Address:

City:

Province:

Postal Code:

Telephone #:

Cell #:

Email Address:

I am the registered owner of the above property and hereby authorize the Corporation of the Town of Lakeshore to:

Shut Off the water at the above noted address Date Required:

Turn On the water at the above noted address Date Required:

I understand that the Town of Lakeshore is not responsible for any damage to the plumbing as a result of the water being shut off or turned on .I understand that a fee of \$30.00 will be charged for both shutting off and turning back on the water. I understand that I will continue to receive a bill for basic charges for water and sewage (if applicable). I confirm that there are no tenants at this address.

Signature:

Date: