



# Application for Discontinuance of Service

171 Main St, Penticton, BC V2A 5A9

Phone: (250) 490-2489 Fax: (250) 490-2422

Email: utilities@penticton.ca



Please accept this Letter of Authorization to Disconnect Utility Services at:

Service Address: \_\_\_\_\_  
 Street Number & Street Name Unit Number

Effective Date (Move out): \_\_\_\_\_ Telephone: \_\_\_\_\_  
 (Monday to Friday starting as early as 7:00 AM—Excluding Statutory Holidays)

Initial here to confirm that the information provided is correct as stated. Email (optional): \_\_\_\_\_

**OFFICE ONLY: CUSTOMER ACCOUNT NUMBER**

### APPLICANT INFORMATION

Applicant for Discontinuance: \_\_\_\_\_  
 First Name Middle Initial Surname

Primary Account Holder Name: \_\_\_\_\_  
 First Name Middle Initial Surname

**Final Utility Bills** are to be sent to  SERVICE ADDRESS or  MAILING ADDRESS (as indicated below)

Mailing Address: \_\_\_\_\_  
 Street Number & Street Name Unit Number

\_\_\_\_\_ City Province Postal Code

Include copies of two (2) pieces of signature ID for each applicant (Driver's License, BC Services Card, Passport, etc.):  
 Copies of ID are not retained and all copies are destroyed after verifying your identity.

Applicant: ID #1 \_\_\_\_\_ ID #2 \_\_\_\_\_  
 Description & Number Description & Number

**All dates of disconnection must fall on a regular business day. Applications must be received prior to 4:00 PM to be processed for the next business day. Account closures cannot be backdated**

### DECLARATION

The City of Penticton respects your privacy and is committed to protecting your personal information. Your personal information is collected in accordance with Section 26(c) of The Freedom of Information and Protection of Privacy Act for the purpose of providing and administering utility services and will only be used for this purpose. If you have any questions about the collection access, use, or disclosure of your personal information, please contact: Corporate Officer/Head of FOIPPA at foip@penticton.ca.

The information may be released to property owners and their designates, Canada Revenue Agency, the RCMP or other agencies under the Freedom of Information and Privacy Protection Act. Tenants are advised that the Registered Owner of the above noted property has access to specific utility account information contained therein.

By submitting this application, I am confirming that I have read and understand the above terms as stipulated and have entered all the information requested. I hereby request the discontinuance of service at the service address on the date specified herein. I acknowledge that the electrical energy and/or water supplied is subject to the bylaws, conditions and regulations of the City of Penticton, and I agree to comply therewith. I authorize and permit the duly authorized employees or agents of the City to enter the said premises to connect or disconnect as required without notice. I agree to protect and indemnify the City against any claim for damages or otherwise by reason of supplying or failure to supply electrical energy or water to the said premises.

I confirm that I am an authorized person on this account.

\_\_\_\_\_  
Signature of Applicant Date

This may be signed electronically by typing in an authorized name.  
This will be considered an official signature and approval.

**OFFICE USE ONLY**  ID VERIFIED

Processed by: \_\_\_\_\_

Date: \_\_\_\_\_