



ENGINEERING DEPARTMENT
616 Okanagan Avenue East, Penticton, BC V2A 3K6
Phone: 250-490-2521 Fax: 250-490-2557

UTILITY SERVICE INQUIRY/REQUEST FORM

DATE: _____

NAME: _____

STREET ADDRESS: _____

CITY: _____ POSTAL CODE: _____

E-MAIL: _____ PHONE NO.: _____

DESCRIPTION OF PROPERTY: Lot #: _____ Plan #: _____

ADDRESS OF PROPERTY: _____

(Leave blank if same as above)

SERVICE INQUIRY/REQUEST

SANITARY SEWER <input type="checkbox"/>	A.R.D.A. DOM. WATER <input type="checkbox"/>	DOM. WATER METER <input type="checkbox"/>
STORM SEWER <input type="checkbox"/>	IRRIGATION WATER <input type="checkbox"/>	ELECTRICAL <input type="checkbox"/>
DOMESTIC WATER <input type="checkbox"/>	DRIVEWAY X-OVER <input type="checkbox"/>	OTHER <input type="checkbox"/>

SIZE OF SERVICE: _____

PREFERRED LOCATION OF SERVICE: _____

REASON FOR REQUEST: _____

SKETCH

COST ESTIMATE: _____ DEPOSIT REQUIRED: \$ _____

PREPARED BY: _____ DATE: _____