



**Application for New Residents**

*The information collected on the Application for New Residents/Application for Water and Utility Services will be used by the City of Warman to provide all municipal services. Under the Saskatchewan Local Authority Freedom of Information and Protection of Privacy Act, the City of Warman has the authority to collect and use your personal information to provide these services. The City of Warman shall not use the personal information under its control without the consent, given in the prescribed manner, of the individual to whom the information relates, except for the purpose for which the information was obtained or compiled – in the case of this form to provide municipal services.*

*By signing below, the resident understands that their personal information is being collected and used to provide for municipal services. Should you have any questions regarding the collection and use of your private information please contact the City of Warman Information and Privacy Officers at (306)933-2133.*

_____	_____	_____
<i>Name (Printed)</i>	<i>Signature</i>	<i>Date</i>
_____	_____	_____
<i>Name (Printed)</i>	<i>Signature</i>	<i>Date</i>

**Should any of your personal information change while you are a resident of the City of Warman, please contact us at (306)933-2133 [to update our customer database.](#)**

<b>For Office Use Only</b>		
<b>Confirmation of I.D.</b>		
I have reviewed and verified that the applicant's identification matches the information provided on this form.		
_____	_____	_____
<i>Name (Printed)</i>	<i>Signature</i>	<i>Date</i>

P.O Box 340  
107 Central Street West  
Warman SK S0K 4S0



Phone (306) 933-2133  
Fax (306) 933-1987

**Application for Water and Sewer Utility Services**

Move In Date: \_\_\_\_\_

Name on Account: \_\_\_\_\_

Additional Names: \_\_\_\_\_  
(Note the account deposit will be held in both names. Signature required below for both applicants)

New Civic Address: \_\_\_\_\_

New Mailing Address: \_\_\_\_\_

Former Civic Address (In Town Move): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Additional: \_\_\_\_\_

- Own Home
- Rent Home                      Landlords Name and Phone # \_\_\_\_\_
- \$290.00 Deposit                      Receipt # \_\_\_\_\_

*In signing this agreement I do so authorize the City of Warman to forward a copy of my utility bills to the registered owner of the property.*

*In signing this agreement I am aware that water services will be automatically disconnected in occurrence of consistent arrears.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

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

City Initial: \_\_\_\_\_

Office Use Only:  
Account Number: \_\_\_\_\_  
Date Received: \_\_\_\_\_  
Initial: \_\_\_\_\_

*The City of Warman is committed to protecting the privacy and confidentiality of personal information. All personal information that is collected by the City is managed according to the Saskatchewan Local Authority Freedom of Information and Protection of Privacy Act.*