

Your application will not be processed if the form is not completed and signed.

PROPERTY INFORMATION

Service Address for Billing Water/Wastewater and/or Stormwater _____ Move-in Date: _____

TENANT INFORMATION

First Tenant's Name: First Name: _____ Last Name: _____

Telephone Numbers: Primary _____ Alternate _____
Email: _____

Second Tenant's Name: First Name: _____ Last Name: _____
(if applicable)

Telephone Numbers: Primary _____ Alternate _____
Email: _____

As the tenant living at the service address as of the move-in date, by signing this form I agree and consent to:

- (a) have the water, wastewater and stormwater bill sent to me;
- (b) pay any amounts owing to Peel Region for water, wastewater and stormwater from the move-in-date to the move-out date;
- (c) pay the change of occupancy fee which will be added to my first bill;
- (d) provide, prior to my move-out date, a forwarding address for my final billing;
- (e) the Region advising the landlord of any arrears on my account;
- (f) the Region contacting me regarding my water, wastewater, and stormwater services.

First Tenant Signature: _____ Date Signed: _____

Second Tenant Signature: _____ Date Signed: _____

LANDLORD INFORMATION

Landlord Name: First Name: _____ Last Name: _____

Mailing Address: _____

Address: City: _____ Province: _____ Postal Code: _____

Email*: _____

***To receive arrears notices provide e-mail.**

Telephone Numbers: Primary: _____ Alternate: _____

- Property owners/landlords are to advise the Region of Peel Water Billing department if there are any changes to their existing account.
- As the landlord and owner of the tenanted property noted above, I understand and accept that I am ultimately responsible for the Water, Wastewater and Stormwater charges as outlined in the Municipal Act, 2001, c. 25 s. 398. For more information, please visit our website at www.peelregion.ca or to review the Municipal Act, 2001, please go to <http://www.e-laws.gov.on.ca>

Landlord Signature: _____ Date Signed: _____

Please complete, sign and return this form to:

Email: WaterbillingTenantform@peelregion.ca
Mail: P.O. Box 2099, Station B, Brampton, ON. L6T 3X2
Fax: 905-791-5112

Notice with Respect to the Collection of Personal Information

Personal information on this form is being collected under the authority of the Municipal Act, 2001, S.O. 2001, c. 25, s. 11, 81, 391 and 398 (2). It will be used to: (a) administer water and wastewater accounts for billing purposes and (b) implement measures to monitor, identify, and contact account holders (i) in the event of unusual water consumption and (ii) to test and replace water meters. Questions about this collection of personal information should be forwarded to the Supervisor of Billing Operations, Public Works at 10 Peel Centre Drive ON L6T 4B9, 905-791-8711 or Caledon- Toll free 905-584-2216, and billingops@peelregion.ca.