



Town of Innisfail
4943 – 53 Street
Innisfail, AB T4G 1A1
Phone: (403) 227-3376 Fax: (403) 227-4045
Email: townhall@innisfail.ca

SERVICE CONNECTION APPLICATION - WATER / SANITARY/ STORM

Date: _____ Application #: _____ Roll File #: _____

Municipal Address: _____

Legal Description: Lot _____ Block _____ Plan _____

Proposed Date of Excavation: _____ Proposed Completion Date: _____

Town of Innisfail requires 48 hours' notice for initial and final inspection.

Registered Owner of Land:

Name / Company: _____ Contact Person: _____

Mailing Address: _____ Prov: _____ Postal Code: _____

Phone: _____ Fax: _____

Email Address: _____

Contractor:

Company: _____ Contact Person: _____

Mailing Address: _____ Prov: _____ Postal Code: _____

Phone: _____ Fax: _____

Email Address: _____ Business License # _____

Plan of service location indicating material, meter and pipe size must be submitted at the time of application. Inspection is required prior to backfill. Contact the Operations Department at 403-227-3376 to arrange for an inspection. Inspections are conducted between 8:30 am and 3:30 pm Monday to Friday.

Check Applicable Service:

- Water Main
- Sanitary Main Storm
- Main
- Water Meter
- Manholes
- Catch Basins
- Fire Hydrants

<p>FOR OFFICE USE</p> <p>Service Connection Fee: <u>\$150.00</u> WTCON</p> <p>Pipe Diameter: _____</p> <p>Water meter size _____</p> <p>Water Meter Cost: \$ _____</p> <p>Total +GST: _____ WTMTR</p>	<p><input type="checkbox"/> Paid</p>	<p>Applicant: _____ Print Name</p> <p>_____ Signature</p>
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Notes: (Reference Town of Innisfail Utilities By-law 1626-2019)