



PO Box 460 | 56 Wheatland Ave
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BULK WATER FILL ACCOUNT APPLICATION

Applicant Information (please print)

Name: _____

Mailing Address: _____

City/Town: _____ Postal Code: _____

Email Address: _____

Residence Phone: _____ Cell Phone: _____

Prepay: \$ _____

Signature: _____

Date: _____

OFFICE USE ONLY

Access Code: _____

Password: _____

Application received by: _____

Date: _____

Protection of Privacy Act Collection Notice: By submitting this application, you are providing personal information including your name, account number, phone numbers, email address, mailing/physical addresses, and postal code. This information is being collected in accordance with Section 4(c) of the Protection of Privacy Act. This information will be used to process your utility disconnection form by the Town of Smoky Lake. For questions about the collection of your personal information, you may contact the Town of Smoky Lake at 56 Wheatland Ave, Smoky Lake, AB T0A 3C0, 780-656-3674, or legislative@smokylake.ca.