



TOWN OF DIDSBURY

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 www.didsbury.ca

APPLICATION FORM SERVICE DISCONNECTION APPROVALS

APPLICATION DATE:	TOWN FILE#:
APPLICANT:	PHONE #:
EMAIL:	FAX #:
MAILING ADDRESS:	POSTAL CODE:
REGISTERED OWNER OF PROPERTY (IF APPLICANT IS OTHER THAN OWNER):	
MAILING ADDRESS:	POSTAL CODE:

DETAILS

ADDRESS OF PROPERTY: _____

LEGAL DESCRIPTION: Lot _____ Block _____ Reg. Plan No. _____
 All or part of the _____ ¼ Sec. _____ Twp. _____ Range _____ West of _____ Meridian (if applicable)

USE OF BUILDING: _____

CONTRACTOR NAME: _____

THE FOLLOWING APPROVALS ARE REQUIRED PRIOR TO A DEMOLITION PERMIT BEING ISSUED:

Service Provider:	Signature:
TOWN OF DIDSBURY - Water and Sewer All service equipment removed	_____
TELUS Communications All service equipment removed	_____
ATCO All service equipment removed	_____
Fortis All service equipment removed	_____
Shaw Cable All service equipment removed	_____
Other	_____

Please obtain signature(s) on the appropriate line(s) and return to the Town Office in order to obtain a demolition permit