

# FINAL BILL



Consumer Name: \_\_\_\_\_

Service Address: \_\_\_\_\_

Route: \_\_\_\_\_

Date For Final Water Reading: \_\_\_\_\_

## Address to send Final Bill

Address: \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_

Postal Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### ***For Office Use Only:***

*Meter Serial Number:* \_\_\_\_\_

*Deposit Refund:* \$ \_\_\_\_\_

*Final Reading:* \_\_\_\_\_

*Cheque #:* \_\_\_\_\_

*Date Read:* \_\_\_\_\_

*Date Paid:* \_\_\_\_\_