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Email: [northlandutilitiesnwt@atco.ca](mailto:northlandutilitiesnwt@atco.ca)

## **REQUEST FOR POWER - BUSINESS ACCOUNT**

The SECURITY DEPOSIT is calculated at three (3) months in which the billing is expected to be the highest.

**Please call the office to discuss payment of Security Deposit**

Connection fee of \$50.00 \*Please contact our office to confirm your request\*

**Please include a copy of the Business License**

**Business Name:** \_\_\_\_\_

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

**Service Start Date:** \_\_\_\_\_

Is there an existing / previous account with Northland Utilities for this Company?  Yes  No

### **Responsible Parties for the Company:**

Owner(s) Name : \_\_\_\_\_

Contact #: \_\_\_\_\_ Email: \_\_\_\_\_

Site Contact Name : \_\_\_\_\_

Contact #: \_\_\_\_\_ Email: \_\_\_\_\_

**Mailing Address** (only if different from the service address above): \_\_\_\_\_

City: \_\_\_\_\_ Province: \_\_\_\_\_ Postal Code: \_\_\_\_\_

### **Planned Power Outage Notification** (only if different from the contact info above):

Contact Name(s): \_\_\_\_\_

Contact #: \_\_\_\_\_

**Signature:** \_\_\_\_\_

Owner

Owner

**24 hour advanced notice required, weekends and holidays excluded**  
Office hours are Monday to Friday 9:00am to 4:00pm  
Terms and Conditions of Service are available on our website or upon request