APPLICATION FOR SERVICES

SERVICES REQUIRED BY: File No: _____

OWNER: _____ PHONE: Bus. _____

ADDRESS: _____ Home _____

WORK TO BE PERFORMED AT: (Civic #) _____ (Street) _____

SUBDIVISION NAME: _____

SERVICES REQUIRED:	REQ'D (X)	RATE	LENGTH/ QUANTITY	AMOUNT	HST
Revisions to Existing Curb, Milled		$112.50/m			
Revisions to Existing Curb, Replacement		$225.00/m			
Revision to Existing Sidewalk		$225.00/m			
Driveway Culvert – 375mm/15" Ø New		$5,000.00 Deposit*	7.3m/24 feet		N/A
Driveway Culvert – 450mm/18" Ø New		$5,000.00 Deposit*	7.3m/24 feet		N/A
Driveway Culvert – 600mm/24" Ø New		$5,000.00 Deposit*	7.3m/24 feet		N/A
Driveway Culvert – 900mm/36" Ø New		$5,000.00 Deposit*	7.3m/24 feet		N/A
Driveway Culvert - 375mm/15" Ø Extension		$320.00/m			
Driveway Culvert - 450mm/15" Ø Extension		$375.00/m			
Driveway Culvert - 600mm/24" Ø Extension		$440.00/m			
Driveway Culvert - 900mm/36" Ø Extension		$660.00/m			
TOTAL SERVICE CHARGES +HST OR DEPOSIT (*SEE TEXT ABOVE)				$	

I REQUIRE THE SERVICES LISTED ABOVE AND AGREE TO PROVIDE THE TOWN OF SALISBURY A MINIMUM NOTICE OF 10 BUSINESS DAYS PRIOR TO THE WORK BEING REQUIRED.

(*IF A DEPOSIT IS REQUIRED, THE DEPOSIT MINUS COST OF CULVERT INSTALLATION AND 15% HST WILL BE RETURNED TO APPLICANTS WITHIN 30 DAYS OF THE TOWN BEING INVOICED FOR THE WORK).

_____ _____

DATE **SIGNATURE**

INFRASTRUCTURE & PUBLIC WORKS AUTHORIZATION TO PROCEED WITH WORK

_____ _____

DATE SIGNATURE

ACCOUNTS RECEIVABLE

AMOUNT RECEIVED $_____ RECEIPT NO. _____ DATE: _____

_____

SIGNATURE

UPON RECIPT OF INVOICE FOR WORK:

AMOUNT TO BE RE-IMBURSED $_____ CHEQUE NO. _____ DATE: _____

_____

SIGNATURE