

Rocky View Water Co-op Ltd.
 25145 Burma Road
 Calgary, Alberta T3R 1B8



info@rvwater.ca

Telephone: (403) 239-6242
 Fax: (403) 241-3897
 www.rvwater.ca

MEMBERSHIP APPLICATION

Applicant: _____ Member #: _____

Mailing Address _____ Postal Code: _____

Phone: Home: _____ Work : _____ Cell: _____

Email Address: _____ Email my bill: YES – please initial: _____
 (A \$2.00 per billing cycle fee applies for paper billing. To avoid this, opt in for email billing by initialing the above)

Co-Applicant: _____ Same Address as Applicant

Mailing Address _____ Postal Code: _____

Phone: Home: _____ Work : _____ Cell: _____

Email Address: _____

LAND DESCRIPTION – PROPERTY LOCATION

Lot(s): _____ Block: _____ Plan: _____ LLD _____ Section: _____ Township: _____ Range: _____ West: _____

Civic Address: _____ Same as Mailing Address

LAND USE

Agricultural Residential Commercial

OTHER INFORMATION REQUIRED

Land Title Certificate Membership Transfer

I/We, the undersigned Applicant(s), own an interest in the Land(s) described above and I/we agree that, to become a Member of Rocky View Water Co-op Ltd., I/we will be required to subscribe for and purchase shares in the Co-op as follows:

1 Class A Voting Share @ \$10 – New Membership	\$ _____
Membership Transfer Fee @ \$250	\$ _____
_____ Class B Non-Voting Shares representing _____ Capacity Unit(s)	\$ _____
Engineering Deposit	\$ _____
Security Deposit	\$ _____

Amount Payable to Rocky View Water Co-op Ltd. **\$** _____

I/We do not make this application as agent(s) for any other person(s) or entity(ies) and I/we agree to abide by RVWC Bylaws, Terms and Conditions of Service, and any Water Service Agreement that may be required hereunder, and understand that I/we are entitled to water supplied in accordance with the authorized flow and pressure restrictions if accepted as a Member of the Co-op.

Signature of Applicant(s): _____ **Date:** _____
 _____ **Date:** _____

Board Approval (Date): _____