

**Owner Information**

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

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

Email: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

Property owned in the RM:  yes  no

Well:  33<sup>rd</sup> (Dalmeny Rd)  North (Warman)  Clarence

**Terms and Conditions**

I understand and agree that I am fully responsible for the safe and proper use of the Water Fill Stations, and that I am expected to read and comply with the operating instructions and directions provided at the Water Fill Stations.

I understand that the water at the fill stations is not disinfected to standards nor is the water quality checked on a regular basis. Consumption and other personal uses of this water are at applicants own risk and that the RM makes no representation as to the current or on-going water quality and safety.

I understand that water may not be available 24/7 and that I may have to find an alternative water source.

I further agree to release, indemnify and safe harmless the RM against any and all claims, actions, costs, expenses, losses and liabilities of whatsoever kind and by whomsoever brought against the RM arising out of or in any way or relating to the granting to me of the fob, or my compliance or non-compliance with he terms of this permit.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

- Cost of FOB is \$20
- FOB's have no cash value and cannot be returned for refund
- No refunds will be issued for any unused water balances held on account

Office Use Only	
Fob #:	Receipt #: