

RURAL MUNICIPALITY OF MEETING LAKE NO. 466

Box 26 ~ Mayfair, SK ~ S0M 1S0

Ph.: 306-246-4228 ~ Fax: 306-246-4974 ~ Email: rm466@sasktel.net

CUSTOM WORK AGREEMENT FORM

Annual Approval*

Date: _____

APPLICANT INFORMATION: Ratepayer

Non-Ratepayer

Name:	
Mailing Address:	
City & Postal Code:	
Phone Number:	
Email Address:	

CUSTOM WORK REQUIRED

Please check off the work to be conducted.

Grading

Snow Removal

Mowing

Other: _____

PROPERTY INFORMATION

Please indicate the registered land location as described at the land titles registry, where the work is required.

QUARTER _____ SECTION _____ TOWNSHIP _____ RANGE _____ MERIDIAN _____

OR

LOT _____ BLOCK _____ PLAN _____ SUBDIVISION _____

I hereby make application and authorize the RM of Meeting Lake No. 466 to perform custom work on my behalf. I agree to indemnify and save harmless the Municipality of any and all damages to my property. I agree that I am responsible to ensure utility locates are completed, if required, in order for the work to be done. **I further understand that the work will only be performed when the equipment is in the area and when time permits.**

I agree to pay to the RM of Meeting Lake No. 466 for the custom work requested at the discretionary rates as set by Council annually. In the event that the charges for custom work completed are not paid within thirty days of the billing date and remain unpaid at year end, any unpaid charges will be added to and form a part of the taxes on my property. The Municipality may refuse services for delinquent accounts.

Witness Signature: _____ Applicant Signature: _____

TO BE COMPLETED BY OPERATOR ONLY

DATE: _____

Grader _____ Hours

Mower _____ Hours

Snow Removal _____ Hours

Other: _____ Hours

Additional Comments: _____

Details for Non-Rate Payers:

License Plate: _____ Make/Model: _____ Company Name: _____