

SEASONAL PRIMARY RESIDENCE FORM

The service located at Service Map Location Number _____ meets the criteria mentioned in **Schedule 2** and is not my primary legal residence. I request my account to be changed to a Schedule 2 (Seasonal Service) account.

Signature of member

Signature of spouse – if joint membership

The service located at Service Map Location Number _____ is my primary residence and I do not meet the criteria mentioned in **Schedule 2**. I understand that I will become a residential class member and will be required to read my meter and submit my reading along with payment on a monthly basis.

Signature of member

Signature of spouse – if joint membership