



R.M. OF ROLAND

REQUEST FORM

Office use only

Date _____ 20 _____

Name _____ Ph. No _____

Land Description _____ Ward _____

Work Needed _____

Sec _____		Sec _____		Sec _____	
Sec _____		Sec _____		Sec _____	

Applicant Signature _____ Municipal Representative _____

MUNICIPAL USE ONLY

Special Instructions:

APPROVALS

- | | | | | | |
|------------|------------------------------|------------------------------|-------------|------------------------------|------------------------------|
| Centra Gas | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | Water Lines | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| MB Hydro | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | Custom Work | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |
| MTS | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A | Survey | <input type="checkbox"/> Yes | <input type="checkbox"/> N/A |

Date Work Completed _____