



Service Reconnection Request Form

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Customer Information

Customer Name(s): _____	Mailing Address: _____
_____	City/Town: _____
_____	Province: _____
Email Address: _____	Postal Code: _____
Telephone (Main): _____	Telephone (Work): _____

Service Information

Service Address: _____	Account Number: _____
City/Town: _____	Meter Number: _____
Province: _____	
Postal Code: _____	

Service Reconnection Request

I, _____, am responsible for the above noted service address. I hereby authorize InnPower Corporation to reconnect my hydro service at this service address without me being present and I hereby confirm that I will not hold InnPower responsible for any damage that may occur. I will also ensure that the service address is safe for reconnection (ex. make sure stove elements, kettles, frying pans, clothes irons, hair dryers, etc are OFF or unplugged to prevent fires from starting when the electricity is restored).

InnPower will NOT be held responsible for any damage or inconvenience, which may be caused by the reconnection of service.

*Note: If your service is disconnected, please be aware that smoke and carbon monoxide alarms that are electrically connected to your home's power supply will not work while the electricity is off, unless they have battery back-ups. Make sure that your home has a battery-operated smoke alarm on every level and a battery-operated carbon monoxide alarm if the dwelling is without electricity.

Authorized Signature(s): _____ **Date:** _____

