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ADDITIONAL RESPONSIBLE PARTY – ADD TO ACCOUNT

Name of Applicant: _____

Statement Account Number: _____

Service Address: _____

Co- Applicant to be added to this account:

Name of Co-Applicant: _____

Date of Birth (Year/M/D): _____

Driver's License #: _____

Driver's License Expiry: _____ **Driver's License Issuing Province:** _____

Employer: _____

Work: _____ **Cell:** _____

Additional Responsible Party Agreement:

I (We) acknowledge that by signing this request, all aspects of this account become the joint responsibility of each account holder (including any arrears and/or any deposit).

Signature of Applicant: _____ **Date:** _____

Signature of Co-Applicant: _____ **Date:** _____