



**Request for Apportionment of Drainage Assessment due to Severance of Land
Section 65 (6) of the Drainage Act, R.S.O., 1990, Chap. D.17**

Property Owner
Name: _____

Home Address: _____

Contact Phone Number: _____

Severance # _____

Property Description
Lot/Concession _____

911 Address _____

Roll Number: _____

I hereby request the Drainage Superintendent of Southwest Middlesex to assist in creation of written agreement for the apportionment of drainage assessments on any municipal drainage works to which the above property is assessed into.

Signature

Date: _____

Signature

Date: _____

*****A DETAILED MAP SHOWING LOCATION OF SEVERED AND RETAINED
PARCELS MUST ACCOMPANY THIS REQUEST**

Request to be returned to: Southwest Middlesex Drainage Superintendent
P.O. Box 218, 153 McKellar St., Glencoe ON N0L 1M0