

221 16th Street South, PO Box 399 Wisconsin Rapids, WI 715-423-6300 Fax# 715-422-9017

Residential Request to Begin or End Utility Service

PLEASE COMPLETE ALL INFORMATION & PRINT CLEARLY

Incomplete applications cannot be processed.

This form is used to establish or transfer residential service at an existing Water	r Works and Lighting Commission address only and NOT to be used with new construction.
☐ Transfer Service ☐ Sta	art Service End Service
New Address to Begin Service	Current Address to Terminate Service
Please verify if you are the current owner, landlord, or tenant:	Please verify if you are the new owner, current landlord, or tenant:
☐ Owner ☐ Landlord ☐ Renter/Tenant	☐ Owner ☐ Landlord ☐ Renter/Tenant
Service Address: (Include Apt. or Mobile Home # if applicable, i.e. 5555 12 th St S Apt. #5):	Service Address: (Include Apt. or Mobile Home # if applicable, i.e. 5555 12 th St S Apt. #5):
Billing Address (if different from Service Address):	Billing Address (if different from Service Address):
Date Service is to Begin (previous dates will not be accepted): # of adults living at property # of children	Date Service is to End (previous dates will not be accepted):
Water Works and Lighting Commission reserves the right to require a signed application for utility service. Customer will be subject to current rates, rules and regulations as set in our tariffs approved by the Public Service Commission of Wisconsin. You are responsible to notify WW&LC when you vacate to end billing at the property. You are liable for all charges incurred until the end date of services. You are also required to provide WW&LC with any changes to contact information.	
Full Legal Name	Full Legal Name
Phone Number(s)#	Phone Number(s)#
Litiployer	*Employer:
*Optional Information if proof of ID is submitted and/or a deposit is paid.	*Optional Information if proof of ID is submitted and/or a deposit is paid.
Stat. my Landlord is given my account balance upon request. I further payment information with I do upon the Party #1 Signature:	
Landlord Section (if submi	tting application for your tenant)
Landlord Name:	
Mailing Address:	
Phone Number:	
Signature if submitting information for your tenant:	nant a notification letter of service in their name.
All information provided will be confidential. False information can be cause for disconnection per the Wisconsin Public Service Commission rule	

All information provided will be confidential. False information can be cause for disconnection per the Wisconsin Public Service Commission rule PSC 113.0301. Residential service may be disconnected or refused for:

(i)Failure of an applicant for utility to provide adequate verification of identity and residency, as provided in sub.(3)