

APPLICATION FOR NEW UTILITY SERVICE

VILLAGE OF ADELL MUNICIPAL UTILITIES
508 SEIFERT STREET
ADELL, WI 53001
994-8620

APPLICANT FULL NAME: _____

ADDITIONAL ADULT OCCUPANTS: _____

SERVICE ADDRESS: _____

MAILING ADDRESS, IF DIFFERENT FROM SERVICE ADDRESS: _____

PREVIOUS ADDRESS: _____, CITY: _____, STATE: _____

CURRENT PHONE: HOME/CELL: _____ WORK: _____

(CIRCLE ONE): OWN ~ RENT If RENTING, NAME OF LANDLORD: _____

DATE TO ACTIVATE SERVICE: _____

HAVE YOU HAD ANY UTILITY SERVICE DISCONNECTED DUE TO NON-PAYMENT OF BILL WITHIN THE LAST 12 MONTHS?

- YES
- NO

I/WE AGREE TO THE FOLLOWING: (PLEASE CHECK ALL THAT APPLY)

- I/WE AGREE TO GIVE ACCESS TO MY METER(S) AT ALL TIMES.
- I/WE AGREE TO BE RESPONSIBLE FOR ALL AMOUNTS DUE WHILE SERVICE IS IN MY NAME.
- I/WE UNDERSTAND THAT BILLS ARE DUE BY THE 20TH OF THE MONTH. BILLS NOT PAID BY THE DUE DATE WILL BE SENT A DISCONNECTION NOTICE AND WILL BE SUBJECT TO TERMINATION OF SERVICE.
- I/WE UNDERSTAND THAT IT SHALL BE MY RESPONSIBILITY TO NOTIFY THE VILLAGE CLERK/TREASURER WHEN SERVICE IS TO BE TERMINATED OR CHANGED FROM MY NAME.

APPLICANT(S) SIGNATURE: _____

APPLICANT(S) DRIVER'S LICENSE NUMBER: _____

APPLICANT(S) DATE OF BIRTH: _____

DO YOU, OR OTHER OCCUPANT OF YOUR HOME, OWN A DOG?

- YES → ALL DOGS IN THE VILLAGE MUST BE LICENSED. A COPY OF RABIES VAC. IS REQUIRED!
- NO

WOULD YOU LIKE TO REGISTER FOR VOTING IN THE ELECTIONS CONDUCTED IN THE VILLAGE OF ADELL?

- YES → PLEASE SEE THE CLERK FOR THE PROPER REGISTRATION FORMS.
- No

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FOR OFFICE USE ONLY

DATE APPLICATION RECEIVED: _____ ACCOUNT # _____