



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

# Commercial 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 **commercial** service at an existing Water Works and Lighting Commission address only and NOT to be used with new construction.

Transfer Service

Start Service

End Service

**New Address to Begin Service**

Please verify if you are the current owner, landlord, or tenant:

Owner    Landlord    Renter/Tenant

Service Address: (Include Apt. or Mobile Home # if applicable, i.e. 5555 12<sup>th</sup> St S Apt. #5):  
 \_\_\_\_\_

Billing Address (if different from Service Address):  
 \_\_\_\_\_

Date Service is to Begin  
 (previous dates will not be accepted): \_\_\_\_\_

**Current Address to Terminate Service**

Please verify if you are the new owner, current landlord, or tenant:

Owner    Landlord    Renter/Tenant

Service Address: (Include Apt. or Mobile Home # if applicable, i.e. 5555 12<sup>th</sup> St S Apt. #5):  
 \_\_\_\_\_

Billing Address (if different from Service Address):  
 \_\_\_\_\_

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.

**Business Information**

Company/Business Name \_\_\_\_\_

Contact Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Tax ID # \_\_\_\_\_

Phone Number: \_\_\_\_\_

CONSENT TO DISCLOSE ACCOUNT INFORMATION TO LANDLORD (OR DESIGNEE): I, \_\_\_\_\_ UNDERSTAND THAT BY Wis Stat. my Landlord is given my Water & Sewer balances upon request. I further consent to Water Works and Lighting Commission to share billing and payment information with \_\_\_\_\_. I do understand that no personal information will be shared at any time.

Responsible Party #1 Signature: \_\_\_\_\_

**Landlord Section (if submitting application for your tenant)**

Landlord Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Signature if submitting information for your tenant: \_\_\_\_\_

Please know WW&LC will send your tenant a notification letter of service in their name.

**All information provided will be confidential. False information can 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)**