



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 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 12th St S Apt. #5):

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 _____

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 12th 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.

Responsible Party #1

Full Legal Name _____
 Phone Number(s)# _____
 *SS# _____
 *Birth Date: _____
 *Driver's License #: _____
 *Employer: _____
 *Optional Information if proof of ID is submitted and/or a deposit is paid.

Responsible Party #2

Full Legal Name _____
 Phone Number(s)# _____
 *SS# _____
 *Birth Date: _____
 *Driver's License #: _____
 *Employer: _____
 *Optional Information if proof of ID is submitted and/or a deposit is paid.

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: _____ Responsible Party #2 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 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)

