

Residential Application for Service

ACCOUNT#

				CUSTOMER #	
	Service Provided:] Electric	Status	¬	
ate of Application		Electric Water		Owner Tenant	
Date Service is Requested by:		Sewer Storm Water		Land Contract (List Seller)	
lame of Applicant	First				
	First		Middle Initial	Last	
Maiden Name or other names used during the last 10	years		Have you previously	been a customer of Reedsburg Utility?	Yes No
Drivers Lic#		State		SS#	
Date of Birth		e-mail addr	ess		
Cell Phone #	Home Phone #			Work Phone #	
lame of 2nd Applicant					
	First		Middle Initial	Last	
Maiden Name or other names used during the last 10	years		Have you previously	been a customer of Reedsburg Utility?	Yes No
Drivers Lic#		State		SS#	
Date of Birth		e-mail addr	ess		
Cell Phone #	Home Phone #			Work Phone #	
Service Address					
				Zip	
Previous address		_ 5.0.0		p	
		State		Zip	
Previous Electric Supply Company					
				Zip	
ame of person(s), other than the applica					
Reedsburg Utility requires positive identificat Before service can be furnished, this applicate fraudulant information may delay service. Be Reedsburg Utility Commission to provide the Agents of the property owner/landlord may Reedsburg Utility providing the name(s) of s The undersigned warrant	ation must be completed in by signing this application for property owner of the sen also receive notification of a aid Agents.	full and subm or service, the vice address li any past due (nitted to Reedsburg applicant(s) name isted notification of charges if the prop	g Utiltiy Commission. Missing, in Ind above hereby authorizes Indiany past due charges.	ncomplete or written consent to
Applicant Signature				Date	
2nd Applicant Signature				Date	
By signing this application for service the pro- utility charges provided at the service addre.		by attests tha	t the applicant(s) i	named above is responsible for	payment of the
Name of property owner			_ Pr	operty Owner Phone #	
Property owner address			City	State	Zip
Property owner signature			_		
A letter of credit is required from your pr	revious electric provider.	Please sig	n the Utility Refe	rence form on the back of th	s page.



Utility Reference Form

To Whom It May Concern:				Date:			
The individual listed below is applying for our Utility's services. We are requesting that your company provide us with a letter of credit so we can finish the application process. Please complete and fax the following form to 608-524-2423.							
Customer Authorization:(Signature)				Date:			
Utility Name:							
Customer Name:							
Account #:							
Former or Current address:				_			
Length of service From(Month/Year)	To						
Number of late payments during the most recent 12 months of service							
Number of times disconnected for non-payment during the most recent 12 months of service							
Outstanding Balance YE	S	☐ NO		Due Date			
Number of checks returned in the last 12 months							
Meter tampering at any time	YES		□ NO				
Additional comments							
If you have any questions regarding this request please contact us at 608-524-4381.							

Thank you, Customer Service Reedsburg Utility Commission