

BELMONT MUNICIPAL UTILITIES
New Residential Utility Service Application

ACCOUNT NUMBER _____

Date you would like utilities put into your name: _____

Applicant's Name: _____		Date of Birth: _____	
First	Middle	Last	
Last 4 Digits of S/S No.: _____		Driver's License No. <u>or</u> other ID No.: _____	
Your Phone No.: <i>home</i> (____) _____		<i>cell</i> (____) _____ <i>work</i> (____) _____	
Employer: _____		Employer's Phone: (____) _____	
(Office Use Only) Driver's License or other ID number verified by office personnel yes no (circle one)			

Spouse/Roommate: _____		Date of Birth: _____	
First	Middle	Last	
Last 4 Digits of S/S No.: _____		Driver's License No. <u>or</u> other ID No.: _____	
Your Phone No.: <i>home</i> (____) _____		<i>cell</i> (____) _____ <i>work</i> (____) _____	
Employer: _____		Employer's Phone: (____) _____	

Street Address of location you are moving into: _____		Apt. # _____	
Your Mailing Address: _____		City: _____ State/Zip _____	
(THIS IS THE ADDRESS YOU WOULD LIKE YOUR UTILITY BILL MAILED TO.)			
Will you? <i>Own</i> <i>Rent</i> => Landlord's Name: _____		Landlord's Phone No.: (____) _____	

**YOU MUST PROVIDE ALL PREVIOUS ADDRESSES WITHIN THE
LAST 6 YEARS* BEGINNING WITH THE MOST RECENT.**

* Please ask for additional sheets if necessary.

Dates living at this residence: _____		until _____	
Address: _____		City: _____ State/Zip: _____	
Electric Utility: _____		Phone No.: (____) _____	
Water & Sewer Utility: _____		Phone No.: (____) _____	
Landlord: _____		Phone No.: (____) _____	

Dates living at this residence: _____		until _____	
Address: _____		City: _____ State/Zip: _____	
Electric Utility: _____		Phone No.: (____) _____	
Water & Sewer Utility: _____		Phone No.: (____) _____	
Landlord: _____		Phone No.: (____) _____	

Dates living at this residence: _____		until _____	
Address: _____		City: _____ State/Zip: _____	
Electric Utility: _____		Phone No.: (____) _____	
Water & Sewer Utility: _____		Phone No.: (____) _____	
Landlord: _____		Phone No.: (____) _____	

(OVER)

BELMONT MUNICIPAL UTILITIES – NEW UTILITY SERVICE APPLICATION (continued)

Do you have any outstanding utility bills at this time? _____ if yes, please explain: _____

The above provided information is true to the best of my knowledge. I authorize Belmont Municipal Utility to contact my previous utility providers and/or previous landlords. I understand this verification process may take up to ten (10) business days, and I further understand that I may be required to pay a utility account deposit equal to two (2) months service if it is discovered that I do have a history of outstanding utility bills and/or a poor payment history.

In addition, I understand that once utilities have been approved and put into my name, it is my responsibility to notify the utility of any changes in occupancy at this location. Written notification is required when additional tenants move in or out of this location. Further, I understand that I am responsible for the utility charges incurred at this location from the date requested on page one (1) of this application until I notify in writing that I have moved and am no longer responsible for this utility bill. Further, I understand that if there are two or more applicants' names listed on this application, each applicant is jointly and severally liable for the utility bills incurred at the above-listed address.

I/WE FURTHER AUTHORIZE THE BELMONT MUNICIPAL UTILITIES TO BILL ME/US FOR SAID SERVICE AND I/WE AGREE TO PAY FOR SAID SERVICE AT RATES ON FILE WITH THE WISCONSIN PUBLIC SERVICE COMMISSION. FURTHER, THAT IN THE EVENT SAID SERVICE IS NOT PAID TIMELY, THE SERVICE SHALL BE DISCONNECTED ACCORDING TO THE RULES OF THE PUBLIC SERVICE COMMISSION.

Applicant's Signature: _____ Date: _____

Spouse/Roommate's Signature: _____ Date: _____