

Account Number \_\_\_\_\_

**VIROQUA UTILITIES DEPARTMENT**

202 N Main St

Viroqua,

WI 54665

Phone: (608) 637-7186 x19 Fax: (608) 637-3108

[utbill@viroqua-wisconsin.com](mailto:utbill@viroqua-wisconsin.com)

**APPLICATION FOR SERVICE FOR RESIDENTIAL CUSTOMERS**

The following information is required for Utility Service

**Must be returned in ten days**

LEGAL NAME OF ADULTS RESPONSIBLE FOR BILL PAYMENT (Please Print)

\* \_\_\_\_\_ DOB \_\_\_\_\_  
Last First Middle Initial

Phone \_\_\_\_\_ Soc Sec \_\_\_\_\_ Dr License \_\_\_\_\_

\* \_\_\_\_\_ DOB \_\_\_\_\_  
Last First Middle Initial

Phone \_\_\_\_\_ Soc Sec \_\_\_\_\_ Dr License \_\_\_\_\_

E-mail address: \_\_\_\_\_

THE OCCUPANTS HEREBY MAKE AN APPLICATION TO THE VIROQUA UTILITY DEPARTMENT FOR SERVICE AT:

SERVICE ADDRESS \_\_\_\_\_

Subject to the rates, rules and regulations on file at the Public Service Commission

MAILING ADDRESS (If different from service address):

Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Date Service Starts: \_\_\_\_\_

Total Number of Persons Living in Dwelling: \_\_\_\_\_

**Please complete both sides of this page**

Property Owner/Landlord/ Property Manager (Please Print):

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

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

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Have you ever had utility service in the City of Viroqua? [ ] Yes [ ] No

If yes, when? \_\_\_\_\_

Under what name? \_\_\_\_\_

List Address of Residence Immediately Prior to this Application:

Street: \_\_\_\_\_

City \_\_\_\_\_ State: \_\_\_\_\_ ZIP \_\_\_\_\_

List any Wisconsin Water/Sewer, Gas or Electric Utility Billing which remains in dispute and/or is unpaid within the last six years:

Utility Name: \_\_\_\_\_

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

"If you are a tenant and have an unpaid, and/or disputed billing from a prior address, the delinquent bill can be cause for disconnection of utility service at the new address."

I understand I am responsible for payment for the utilities at the above address from the starting date of service on application, until I notify the Utility of a final water meter reading, and the service is no longer in my name.

Applicant #1 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Applicant #2 Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*For your convenience we offer On-line Billing, Credit/Debit Payments and ACH*