

VILLAGE OF BIRCHWOOD

101 N. MAIN STREET
BIRCHWOOD, WI 54817

Application for Utility Service

APPLICANT INFORMATION

Full Name: _____ SSN: _____

DL #/State: _____ DOB: _____ Email: _____

Employer: _____ Phone(s): _____ / _____

CO-APPLICANT INFORMATION

Your spouse is NOT presumed to be a co-applicant. They MUST be added and present an I.D. at application time. No information will be shared unless they are on this application.

Full Name: _____ SSN: _____

DL #/State: _____ Phone: _____ Relation: _____

SERVICE LOCATION INFORMATION

Service Address: _____ Zip Code: _____

Mailing Address: _____ City/State: _____ Zip: _____

Are you the:

Landlord Name: _____

_____ Property Owner
Closing Date: _____

Landlord Address: _____

_____ Tenant
Lease Start: _____

Landlord Phone: _____

Have you previously had service with us? Y / N

If yes, under what name?: _____

At which address?: _____

OFFICE USE ONLY	
Meter Reading:	_____
Date Read:	_____

All applicants and contracts for service shall be made in the legal name of the party to be obligated to pay for the service. Birchwood utilities reserves the right to require written contract for service to be furnished.

I have read and understand the above. I will be responsible for utility costs at the above address.

Applicant Signature: _____ Date: _____

Co- Applicant Signature: _____ Date: _____