



WATER & SEWER UTILITY

W240N3065 Pewaukee Rd., Pewaukee, WI 53072 (262)-691-0804 FAX- (262) 691-5729
Email: publicworks@pewaukee.wi.us

RESIDENTIAL APPLICATION FOR SERVICE

This applicant applying for Water / Sewer service for the below premise agrees that said water/sewer shall be used in conformity with the rates, rules and regulations on file with the Public Service Commission of Wisconsin, and/or in the office of this utility. I agree to pay for services at the established rates.

Note: Only the property owner (or authorized agent on file with this office) can add a billing name or authorize address changes.

Application Date: _____

Move: (in) _____ or (out) _____ Effective date of service change: _____

Service address: _____ Apartment / Unit No: _____

Primary name on account: _____

Billing Address if different: _____

Phone No. _____ Email Address: _____

Name change on account: _____ Add ___ Delete ___

Forwarding
Phone number: _____ Email Address: _____

For E-billing: I (we) hereby authorize the City of Pewaukee to electronically provide my (our) utility billing to me (us). I (we) understand that it is my (our) responsibility to check for receipt of the billing each quarter; March 20th, June 20th, Sept 20th, Dec 20th; to ensure that penalties and interest are not applied for non-payment.
E-billing address www._____

Customer Signature: _____ Date: _____

Office Use Only Account Number: _____ Tax Key # _____
Date received: _____ Date processed: _____ Initials: _____