



MANITOWOC PUBLIC UTILITIES

1303 South 8th Street P.O. Box 1090 Manitowoc, WI 54221-1090 920-683-4600 FAX 920-686-4315 www.mpu.org

RESIDENTIAL APPLICATION FOR SERVICE

Application Date: _____
Service Applied For: _____ Electric _____ Water/Sewer
Service Address: _____
Apartment/Unit: _____ Start Date of Service: _____
Ownership Status: _____ Own _____ Rent Landlord: _____

Name: _____ Phone: _____
Social Security # _____ DOB: _____
ID/Drivers License _____ Expires _____

Billing Address _____

Employer: _____

Roommate/Spouse: _____ Phone: _____
Social Security # _____ DOB: _____
ID/Drivers License _____ Expires _____

Billing Address _____

Employer: _____

Prior Address: _____

Previous/Maiden Name: _____

Customer Agreement: I hereby apply for Electric and/or Water/Sewer service for the above premise. I agree that said electricity and/or water/sewer shall be used in conformity with the rates, rules and regulations on file with the Public Service Commission of Wisconsin, or in the office of this utility. I agree to pay for services at the established rates.

Customer Signature: _____ Date: _____

OFFICE USE ONLY Account Number: _____

Comments: _____

