

**WATER AND WASTEWATER BOARD OF THE CITY OF MADISON RESIDENTIAL
APPLICATION FOR WATER AND SEWER SERVICE**

APPLICATION DATE: _____

ACCOUNT NO: _____

LOC ID: _____

SERVICE LOCATION: _____

BUYING _____ RENTING _____ LANDLORD _____

MAIL ADDRESS (IF DIFFERENT FROM SERVICE LOCATION) _____

CUSTOMER NAME: _____

LAST

FIRST

MI

DATE REQUEST SERVICE START: _____ HOME PH#: _____

EMPLOYER: _____

WORK PH: _____ DL# _____

SPOUSE NAME: _____

EMPLOYER: _____ WORK PH: _____

RECEIPT# _____ DEPOSIT _____ SVCE FEE _____

NOTES: _____
