

**APPLICATION FOR ELECTRIC AND WATER SERVICE WITH
CADOTT LIGHT AND WATER**

To the Clerk of the Village of Cadott, Wisconsin:

Answer the following questions fully and completely:

DATE: _____ PHONE: _____ CELL: _____

NAME: _____
 FIRST MIDDLE LAST

MAIDEN NAME: _____

DATE OF BIRTH: _____ PLACE OF BIRTH: _____

DRIVER'S LICENSE NUMBER/STATE: _____

MOVE IN DATE: _____

MOVE IN ADDRESS: _____

MAILING ADDRESS: _____

PREVIOUS ADDRESS: _____

I HEARBY AGREE AND UNDERSTAND THAT IS MY RESPONSIBILITY TO PAY
ANY AND ALL EXPENSES INCURRED WITH THE CADOTT LIGHT AND
WATER UTILITY.

APPLICANT'S SIGNATURE: _____

(COPY DRIVERS LICENSE)