

**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)