



BLUE MOUNDS WATER & SEWER UTILITIES

11011 BRIGHAM AVENUE, P. O. BOX 189
 BLUE MOUNDS, WI 53517-0189
 TELEPHONE 608.437.5197 ext. 2
 FAX 608.437.4198

**WATER/SEWER UTILITIES & REFUSE APPLICATION FOR SERVICE
 SERVICED PROPERTY INFORMATION (REQUIRED)**

Address:		City/St/Zip	
Effective Date of Request:		Account Number: (if known)	
Buyer/New Property Owner Information (Required)			
Name:		Phone:	
		Alternate Phone:	
		Email:	
Name 2:		Address:	
Seller/Former Owner Final Bill Information			
Name:		Phone:	
Address for final bill:		City/St/Zip	
<p>I understand that once utilities have been approved and put into my name or taken out of my name, it is my responsibility to notify the utility of any changes in occupancy at this location. Further, I understand that I am responsible for the utility charges incurred at this location from the date requested of this application until I provide notice that I have moved and am no longer responsible for the utility bill. I FURTHER AUTHORIZE THE BLUE MOUNDS UTILITIES TO BILL ME FOR SAID SERVICE AND I AGREE TO PAY FOR SAID SERVICE AT RATES ON FILE AT THE VILLAGE OF BLUE MOUNDS.</p>			
Signature:		Date:	
OFFICE USE ONLY			
Date Received:		By:	

BILLING & PAYMENT INFORMATION

Utility bills are mailed at the end of the month. Refuse & recycling charges are included on the bills. Payments are due on the 20th of the month and are accepted at the village office, through the mail or can be put in the drop box at the village hall. The Utilities enforce payment of the bills by following disconnection procedures when necessary. To avoid disconnection of service, payment arrangements can be made.

THE FOLLOWING IS OPTIONAL:

Blue Mounds Utilities
Direct Payment Authorization

Here is how the direct payment plan works:
You authorize regularly scheduled payments to be made from your savings or checking account. Your payments will be made automatically on the 20th of each month, and proof of payment will appear on your billing statement. The authority you give to charge your account will remain in effect until you notify us in writing to terminate the authorization. To take advantage of this service, complete the authorization form with a voided check and return to the village hall.

******MUST ATTACH A VOIDED CHECK******

Please complete the information below:

I authorize the Village of Blue Mounds to initiate electronic debit entries to my:
_____ Checking account (or) _____ Savings account for payment of water, sewer and refuse bill.

I acknowledge that the origination of ACH transactions to my account must comply with the provisions of U.S. law. This authority will remain in effect until I have cancelled it in writing.

Date: _____

Financial Institution Name (print) _____

Financial Institution Account Number: _____

Financial Institution Routing Number: _____

Financial Institution City: _____ State _____

Blue Mounds Utility Account Number: _____

SIGNATURE: _____