

Application for Utility Service

Mount Horeb Utilities, 138 E Main Street, Mount Horeb, WI 53572

Phone: 608-437-3084 Fax: 608-437-3190

Service Address		Move In Date	Circle One	
			RENT OWN	
Primary Person Responsible for Bill		Phone Number		
Social Security or Driver's License Number		Alt Phone Number		
Spouse or Other Responsible Person		Phone Number		
Social Security or Driver's License Number		Alt Phone Number		
Mailing Address if Different than Service Address		City	State	Zip
Email Address				
Primary Person's Previous Address if in Mount Horeb				
Address		City	State	Zip
Landlord Information if Renting				
Name		Address		Phone

Setting up a Security Question

When calling in to obtain information or make changes to your account, you will be required to answer a security question. Please answer **at least two** of the following questions as your security questions. Make sure all people listed as being responsible know the answer to the following questions:

Name of High School you graduated from: _____

Name of Street you grew up on: _____

Name of childhood pet: _____

Favorite Color: _____

Last 4 digits of Social Security Number: _____

Mother's Maiden Name: _____

The applicant(s) understand and acknowledge that by signing this application for service, he/she is accepting responsibility for payment of the utility bills and that non-payment could result in the disconnection of service. The applicant(s) are also certifying that the information provided on the application is true and correct.

Application must be signed in the presence of Mount Horeb Utility personnel or a Notary Public

Signature of Primary Person Responsible	Date
Signature of Spouse	Date

Application must be signed in the presence of Mount Horeb Utility personnel or a Notary Public

Notary Signature	Date	Account Number
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Return completed form within 5 days of move in date or service could be disconnected