

Employer Name: _____

Employer Phone: _____

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Previous Utility Company: _____

I **HAVE/DO NOT HAVE** (circle one) an outstanding account with the previous utility company.

References: (**Optional unless you have a past due utility balance at a previous address.**)

Name	Phone Number
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Name	Phone Number
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Will you be renting at the above service address? Yes _____ No _____

If yes, complete the following:

Landlord Name: _____

Landlord Phone: _____

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The undersigned applicant (the customer) applies to the Juneau Utility Commission (the Utility) for service under Juneau Utility's rate schedule(s), and requests that the utility extend its distribution facilities necessary to provide such service all in accordance with its rate schedule, rules and regulations on file with the Public Service Commission of Wisconsin.

The utility agrees to furnish, and the customer agrees to take and pay for, said service in accordance with the provisions and rates of the above named schedule, and subject to all applicable rules of the utility on file with the Public Service Commission including terms and conditions, until such time as the customer discontinues service or elects to make written application for service under a different schedule. Such election for revised service, however, may not be exercised within a one-year period from date of this application.

The undersigned applicant will also be expected to pay their utility bill by the terms stated on their utility bill, which is the 20th of every month. Any utility customer that has an outstanding balance over 60 days will be reported to a collection agency.

The residential customer acknowledges the right to make written request to the utility that the County Department of Health and Social Services be notified at least five (5) calendar days prior to a scheduled disconnection of electric service for rule violation or nonpayment.

Terms and Conditions of Service

- (1) The applicant(s) individually and jointly agree(s) to indemnify and hold harmless the Utility from all claims against the Utility because of any injury, disease or death sustained by reason or any act, omission, or negligence of the applicant, or any agent, employee, or subcontractor thereof, whether or not such injury, disease, or death shall be contributed to by any act, omission, or negligence on the part of the Utility, its agent or servants.
- (2) This agreement shall become effective when acceptance of the application has been signed on behalf of the Utility.
- (3) If the property being serviced pursuant to this application is also used as a personal residence, the applicant(s) acknowledge(s) the right to make written request to the Utility that the County Department of Health and Social services be notified at least five (5) calendar days prior to a scheduled disconnection of electric service for rule violation or nonpayment.

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*** Service remains in applicant’s name until the utility is notified by applicant.

Signature: _____ Date: _____

Consent to Disclose Customer Information

We, the Juneau Utility Commission are seeking your consent to allow the Juneau Utility Commission to disclose your customer information to a title company, bank or real estate broker when the customer premises is being sold, transferred, foreclosed, or any other reason in which a final billing or change in billing is necessary.

In addition to the information described above, the customer information being disclosed may include your name; account number; service address; premise number; premise description; meter read dates; number of days in the billing period; utility invoice date; invoice amounts; and other (specify):

Utility Customer's Consent

Your customer information is protected from disclosure to the public pursuant to Section 196.137 of the Wisconsin Statutes. You are not required to authorize the disclosure of your customer information, and your decision not to authorize the disclosure will not affect your utility services. You are free to withhold your consent.

You should understand that the Juneau Utility Commission will have no control over your customer information once it is disclosed pursuant to this consent, and the Juneau Utility Commission will not be responsible for monitoring or taking any steps to ensure that the recipient of the information maintains its confidentiality or uses the information for the purposes stated above.

By signing this consent form, you acknowledge and agree that you are the customer of record for this account and that you authorize the Juneau Utility Commission to disclose your customer information as described in this consent form. This consent is valid for one year from the date you sign this consent form or, a shorter period, if you terminate your service or withdraw consent by sending a written request with your name and service address to the Juneau Utility Commission, 100 Lincoln Drive, Juneau, WI 53039 or by emailing: utilitycustomerservice@cityofjuneau.net. You may terminate this consent at any time.

Account Number: _____

Service Address: _____

Printed Name: _____

Signature: _____ Date Signed: _____