

EAU CLAIRE WATER SEWER AND STORM UTILITIES
P.O. BOX 909 EAU CLAIRE, WI 54702-0909

PHONE: (715) 839-4954 FAX: (715) 839-3878
EMAIL: utilities@eauclairewi.gov

Utility Service Transfer Form Owner Occupied

Service Address:

Last Date of Service:

Meter Read for Date of Vacancy
Include all Numbers:

The customer may have the Utility obtain the final meter reading, and a special meter reading charge will be assessed. If entry to the premise is required for a meter read, an additional missed appointment charge will be billed if the customer fails to be present at the scheduled appointment.

Final Billing Information (Customer Ending Service)

Send Final Bill To: _____ Name 2: _____

Mailing Address: _____

Telephone No: _____ Email: _____

New Customer Information (Customer Beginning Service)

****All customers listed on the utility bill must sign the form****

Customer Name: _____ Name 2: _____

Mailing Address: _____

Telephone No: _____ Email: _____

Previous Address: _____

Owner Agreement

As the owner, I hereby accept responsibility for all charges pertaining to water usage, sanitary sewer service, and/or storm water management from the above date and water meter reading. I understand that a special billing charge may be billed to my account as applicable and understand that any unpaid balances as of **November 15** of each year will be placed on the tax roll and become a lien against the property.

Owner Signature: _____ Date: _____

Owner Signature: _____ Date: _____

Visit www.eauclairewi.gov for more information regarding the utility billing ordinances and procedures.