



Lodi Utilities
130 South Main St
Lodi, WI 53555

Application for Utility Service

Rent Own

Name(s) on Account _____
(Name of Person(s) Responsible for Bill – Please Print)

Street Address _____ Apartment/Suite No _____

City/State _____ Zip Code _____

Home/Cell Phone No _____ Email _____

Previous Address _____ City/State/Zip Code _____

Previous Electric Provider _____ Previous Gas Provider _____

Employer's Name _____ Employer's Phone No _____

Drivers License No _____

Landlord Name _____ Landlord Phone No. _____

Additional Name on Account (if applicable)

Name _____

Home/Cell Phone No. _____ Email _____

Employer's Name _____ Employer's Phone No. _____

Drivers License No _____

Signature of Applicant(s)

Signature Date

Signature Date

For office use only:

Date of New Service _____

Utility Acct Number _____

The applicant(s) understand(s) and acknowledge(s) that by signing this application for service, he/she is accepting responsibility for payment of the utility bills and that non-payment of the bills could result in disconnection of service. Please bring completed and signed application to address above along with a picture id. Do not mail or fax.