

Willmar Municipal Utilities PO Box 937, 700 Litchfield Ave SW Willmar, MN 56201 Phone 320-235-4422 * Fax 320-235-3980 www.wmu@willmar.mn.us

For Office U	r Office Use Only:					
SO#:	Account #:	(Prev. Address)				
SO#:	Account #:	(New Address)				

Application for Service

Name						
Name:	First		Middle	Middle		
Previous Address:			Move Ou	ıt Date://		
PO Box / Street	-	1				
New Physical Address:	Apt. Name	Ant. #	Move In	Date://		
Mailing Address (if different from						
maning mainess (in unterent from]	physical address)	•				
Telephone:						
				ue Recapture and collections purposes only)		
Email Address		Status: 🗆	Renter 🗆 Owner			
□ By checking this box, you are authorizing WMU to send notifications based on the information above via email or SMS (text) message. (ex. outage information) A Deposit is required for ALL rental or leased property. The Deposit is required PRIOR to transferring service and billing into applicant's name. Deposits can also be transferred from one residence in Willmar to another. When you move out of WMU's service territory, the Deposit will be applied to the final bill and a refund check will be issued for any remaining credit balance. \$250.00 Deposit Required □ Paid □ Transfer to □ Waived *Deposits on residential accounts will be returned on the next regular billing after a customer has made twelve (12) consecutive "on-time" payments when a Social Security Number is supplied for Revenue Recapture Purposes only. <u>Red Flag Rule</u> As part of the FTC's Red Flag Rule, WMU is required to verify every applicant's identity. Identity Verified: □Driver's License □Identification Card □Other						
As a requirement of service, I agree that WMU and Landlord/Property Owner/Management Company listed below have my permission to communicate regarding all billed utility services provided by WMU for this property.						
Landlord/Property Owner/Manage	ment Company _		Phone	9		
As account holder, if you would like to allow someone other than yourself and your Landlord/Property Owner/Management Company to have access to the billing information contained in your account, they must be listed below. (ex. spouse/child/roommate)						
Name:		Name:	- <u>-</u>			
Last	First		Last	First		
I certify as the account holder and responsible party of this account that the above person(s) listed may have access to the information regarding my account in relationship to account balances, account usage or changes and other basic information. Under no circumstances will my social security number ever be shared with the authorized persons.						
	Applicant Signatu		Date	RP3 RP3		

WILLMAR MUNICIPAL UTILITIES DATA PRIVACY NOTICE: "TENNESSEN WARNING"

As part of your application for municipal utility services, and in providing those services, Willmar Municipal Utilities (WMU) requests private or confidential data about you. The private or confidential information that you provide is not available to the public. In accordance with the Minnesota Government Data Practices Act, Minnesota Statutes, Section 13.04, subd. 2, WMU must notify you of the following three points:

1. The purpose and intended use of the requested information:

To confirm your identity; to process your application; to determine your credit status for receipt of services; to provide products and services; to communicate with you; to respond to your questions; to provide customer support; to schedule or respond to maintenance or service calls; to collect monies owed for the services or equipment provided; to protect against fraud, unauthorized transactions, and claims; to operate, evaluate, and improve our business; and to determine eligibility for and administer customer participation in events, utility programs, surveys, promotions, rebates, and assistance.

2. You may refuse to provide private or confidential data to WMU. If you do not supply this information, however, WMU will be unable to process your application or provide utility services.

3. The information that you provide may be accessible to the following persons or entities:

- You, and persons who have your express written consent;
- WMU and City officials and staff who reasonably require access to your information in the course of their work duties or responsibilities;
- Credit or collection agencies to assist in determining credit or collecting on an account if it becomes delinquent;
- State agencies such as the Minnesota Department of Commerce; and
- Outside vendors required under contract with WMU to maintain the confidentiality of the information, including, but not limited to, billing and credit card processing, wholesale power supplier, energy consultants, rebate providers, and energy assistance agencies.

In addition, as permitted by Minnesota Statutes, Section 13.685, WMU may release your private or confidential data to:

- A law enforcement agency that requests access to the data in connection with an investigation;
- A school for purposes of compiling pupil census data;
- A public child support authority to establish or enforce child support; or
- Any other person when use of the data directly advances the general welfare, health, or safety of the public.

Other government entities accessing private or confidential data must also comply with the Minnesota Government Data Practices Act.

I acknowledge by signing this form that I have been informed of and understand my rights and I hereby consent to the release of the above information to WMU for the purposes stated herein. The information that I have provided is accurate.

(Signature of Individual Authorizing Release)

Date

