



PO Box 937, 700 Litchfield Ave SW  
Willmar, MN 56201  
Phone: 320-235-4422  
Email: [customerservice@wmu.willmar.mn.us](mailto:customerservice@wmu.willmar.mn.us)  
Website: [www.wmu.willmar.mn.us](http://www.wmu.willmar.mn.us)

For Office Use Only: Processed by: \_\_\_\_\_

SO#: \_\_\_\_\_ Account #: \_\_\_\_\_ (Prev)  
SO#: \_\_\_\_\_ Account #: \_\_\_\_\_ (New)  
Identity Verified:  
DL \_\_\_\_\_ ID Card \_\_\_\_\_ Other \_\_\_\_\_

## Residential Application for Service

### Applicant Information:

Status: ☐ Renter ☐ Owner ☐ Agent

Customer Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ MI. \_\_\_\_\_  
Previous Address: \_\_\_\_\_ Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ Move Out Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
New Service Address: \_\_\_\_\_ Street Address \_\_\_\_\_ Apt. # \_\_\_\_\_ Move In Date: \_\_\_\_/\_\_\_\_/\_\_\_\_  
New Mailing Address (if different from physical address): \_\_\_\_\_  
Email Address \_\_\_\_\_  
Telephone: \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_  
(Used for collections purposes only)

### Co-Applicant Information:

Co Applicant Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ MI. \_\_\_\_\_ Relationship to Applicant \_\_\_\_\_  
Co Applicant Phone: \_\_\_\_\_ Home \_\_\_\_\_ Cell \_\_\_\_\_ Work \_\_\_\_\_  
Email Address: \_\_\_\_\_ Social Security Number \_\_\_\_\_ Date of Birth \_\_\_\_\_

- ☐ I am interested in electronic billing and auto pay or online payment. Please send me more information to set this up.  
☐ By checking this box, you are authorizing WMU to send notifications via electronic means such as email or SMS (text) message. (E.g. outage information)  
☐ I am interested in more information on energy conservation programs and management of my electric usage.

### Utility Deposit:

A utility deposit of \$250.00 is required for services on all rental or leased property. The deposit is required prior to transferring service and billing into an applicant's name.

A copy of the lease is required on all leased/rental property. 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/Management Company \_\_\_\_\_ Phone \_\_\_\_\_

If you would like to allow someone other than yourself, co applicant or your Landlord/Property Owner/Management Company to have access to the billing information contained in your account, they must be listed below. (ex. spouse/roommate/conservator)

Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Name: \_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_

I certify as responsible party of this account that the above information is true and correct and that the above person(s) listed may have access to account balances, usage or changes and other basic information.

Applicant Signature

Date

Co-Applicant Signature

Date



## **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