STOP Service



is application is to end service with Marshfield Utilities and stop billing. Completion of this form will begin the process to prepare a final bill that will be mailed to

Fields with (>) are required

Marshfield Utilities ACCOUNT Information									
	First Name			MI	>	Last Name			
	Street								Apt#
	City					>	State	>	Zip Code
		>	Select only ONE	I'm SELLING this Prop	erty	•	I was RENTING this Propert	ty	I'm the LANDLORD
	> Date Service is to STOP:				/ /				



C SALE Information Renters and Landlord can skip ahead to Additional Notes. This portion MUST be completed if you are ending service because you have SOLD this property. The Buyer's name and number will be on the purchase agreement you have already received from your Realtor.									
BUYERS First Name	> BUYERS Last Name								
Phone Number (###) ### - ####									

TERMS - I understand that this application is to end utility service at an existing Marshfield address, but if I am the Owner, I will continue to be billed for Public Fire Protection. I understand that Marshfield Utilities requires one business day after receiving this completed application for the service to end. I understand that an incomplete application will not be processed and will delay my service request. I understand that a if my account has a deposit, it will be returned to me with interest per PSC 113.0402(13). Marshfield Utilities requires a written or electronically stored application to end service. I further understand that I am liable for all charges incurred until I have submitted a valid request to end utility services and that my final bill will be prepared within 15 days of termination. I understand that I am responsible to provide my new mailing address to Marshfield Utilities. I understand that all information provided will be confidential. If I am the Landlord of the property, and I have requested to STOP the service of my Tenant, I understand that services will be put on to my Marshfield Utilities account.

S.	
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Signature (agreeing to application and TERMS)

Date

Signature (agreeing to application and TERMS)

Date