



VILLAGE OF KIMBERLY

515 W. Kimberly Avenue
Kimberly, WI 54136

Susan Brown
UTILITY BILLING CLERK
P 920-788-7500
F 920-788-9723
waterbilling@vokimberlywi.gov

New Meter Installation / New Service

This form must be completed and returned PRIOR to installation of any new meter.
ALL KIMBERLY & HOVMSD HOOKUP FEES MUST BE PAID prior to new meter installation.

SERVICE ADDRESS: _____, Kimberly, WI _____

(Person completing form) (Date) (Phone #)

Requested Meter Size: _____

BUILDER INFORMATION Builder is responsible for water bill unless otherwise indicated.

Builder's Name: _____

Builder's Mailing Address:

(Address) (City) (State) (Zip)

Telephone #: _____ Email: _____

ACCOUNT INFORMATION **COMPLETE IF INITIAL WATER BILLING IS IN A DIFFERENT NAME**

NAME on the WATER BILL: _____

Billing Address (if different than service address):

(Attn.) (Address) (City) (State) (Zip)

Contact name for business accounts: _____

Telephone #: _____ Email: _____

Signature of Person Responsible for the Water Account: _____

OFFICE USE

Account #: _____ Rt Sequence #: _____

Customer Type: _____ ERU's: _____

Requested Date of Installation: _____ Preferred Time: _____

Plumbers Contact Information: _____