



Start Service Request – Business

(Please Print)

Notice: A Customer Processing Charge of \$25.00 will be added to your first bill.

Date: _____

Have you ever had service with McMinnville Water & Light? Yes No

Business/Organization Name: _____

Point(s) of Contact: _____

Service Address: _____

Previous Address: _____

Mailing Address: _____

Date to Start Service: _____

Automatic Payments from Checking Account: _____ Initials **A voided check is required**

Valid Photo ID and Rental/Lease Agreement or Proof of Ownership required for all Service Connections

Social Security Numbers are provided voluntarily; Collection is made by authority of the MW&L Commission rules for customer service; Failure to provide the SSN to MW&L may result in denial of service or requirement for a reasonable security deposit; The SSN will be used to evaluate credit, prevent identity theft, and for use in collection of delinquent payments.

Business

Federal Tax ID #(SSN): _____ Business Telephone: _____

Inc Date/DOB: _____ E-Mail Address: _____

Point(s) of Contact

Name: _____ Name: _____

Title: _____ Title: _____

Phone: _____ Phone: _____

E-Mail Address: _____ E-Mail Address: _____

I/we hereby certify that the personal information provided above is true and accurate. Falsification of information can be used as justification for termination of credit agreement. Social Security Number will be kept confidential pursuant to ORS 192.502(2), ORS 192.502(4). Social Security Number may be used to collect delinquent accounts in our collection process, as necessary. Customer information procedures are established in MW&L Customer Policies as approved by the MW&L Commission.

Signature: _____ Date: _____

Signature: _____ Date: _____

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