



# Start Service Request – Business

(Please Print)

**Notice: A Customer Processing Charge of \$28.00 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(Business Days Monday-Thursday): \_\_\_\_\_

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

The last 4 digits of the Social Security Number are provided voluntarily and are not required for service; Collection is made by authority of the MW&L Commission rules for customer service; The last 4 digits of the SSN will be used by MW&L for account security, to prevent identity theft, and for use in collection of delinquent payments. Further public disclosure is limited by law. See ORS 192.355(28).

### Business

Fed Tax ID #: \_\_\_\_\_ 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 service .

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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