



Start Service Request – Residential

(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

Applicant (First, Last, M): _____

Co-Applicant (First, Last, M): _____

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).

Applicant

Co-Applicant

Last 4 of SSN #: _____ Last 4 of SSN #: _____

Date of Birth: _____ Date of Birth: _____

Driver's License or ID: _____ Driver's License or ID: _____

Employer: _____ Employer: _____

Home Telephone: _____ Home Telephone: _____

Business Telephone: _____ Business Telephone: _____

Mobile Telephone: _____ Mobile Telephone: _____

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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