



HO-CHUNK NATION DEPARTMENT OF HOUSING

Application For Water Service/Payment Agreement

** Connection Fee of \$25.00, Copy of Driver's License and/or Tribal I.D. Must Accompany This Form **

Name of Applicant: _____ Phone # _____

Connection Address: _____ City: _____ State: _____ Zip: _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

I, _____ am requesting public water supply service from the Housing Department at the above location. If approved, I understand and agree that I will pay a monthly water use charge of \$25.00, beginning on _____. This monthly fee is subject to change if the Utilities Department determines such a need to adjust its rates. Payments are due by the 15th of each month, and made payable to the Ho-Chunk Nation Department of Housing, P.O. Box 170, Tomah, WI 54660. If payment becomes past due, I understand and agree that I will sign a voluntary Per Capita Distribution form for these amounts. If payment is not made and I refuse to make arrangements for payment, I understand that legal action will be taken against me to collect a debt owed to the Nation. If I no longer desire water service at this address, I agree to notify the Department of Housing office in writing to terminate service. If I fail to notify the office of any change of address or responsibility for payment, I understand and agree that I will continue to be responsible for payment until such notification is made.

Applicant's Signature

Date

Social Security Number

Tribal Affiliation

Enrollment Number

Date of Birth

Move Out Date

P.O. Box 170, Tomah, WI 54660
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