



Little Chute

108 W. MAIN STREET
LITTLE CHUTE, WISCONSIN 54140

UTILITY BILLING REMOVING CO-APPLICANT

I, _____, hereby grant the following permission for the Village
(Tenant/Owner's Legal Name)

of Little Chute to revise my billing by removing a Co-Applicant namely, _____
(Co-Applicant's Legal Name)
to _____
(Account Number)

Service Address: _____
Street Address _____ City, State and Zip _____

Owner's Phone Number: _____ Email: _____

Co-Applicant's Phone: _____ Email: _____

Landlord's Name (If Applicable): _____

Landlord's Phone Number: _____ Email: _____

Co-Applicant

- Will no longer accept financial responsibility and agrees that if the applicant owes the Village of Little Chute for any past due utility bills, all unpaid bills must be PAID IN FULL prior to closing the account.
- Will no longer have full access to
 - the billing account and updating information.
 - Starting, stopping, or transferring services.
 - Setting up payment agreements.

Applicant Signature: _____ Date: _____

Co-Applicant Signature: _____ Date: _____