

Phone: 262-275-6136 Fax: 262-275-8088 E-Mail: villageclerk@villageoffontana.com

P.O. Box 200 Fontana, WI 53125

## QUARTERLY WATER/SEWER BILLING ENROLLMENT FORM

1. Please enroll my account in e-mail billing. Complete all sections. Use a separate form for each account.

	Name (as it appears on your bill) Fontana Street Address			
	Mailing Address			
	City	State	Zip	
	Phone Number			
	E-Mail Address			
2.	Utility Account Number			
	I wish to opt out of pape	r billing	I wish to receive my bill by mail and email	
which a my res charge of Font	Automatic Debit For Quarte <a href="https://villageoffontana.com">https://villageoffontana.com</a> ing this form, I understand to are issued in January, April, January, April, January to pay it by the dos that may be applied due to	hat I take responsibility uly, and October each y ule date (the 20 <sup>th</sup> of Januarthe late payment. I und dress. Should I choose to	an account, please fill out an arollment Form which is available at applications/ or at the Village Hall.  for receiving and paying my quarterly utility bills year. I understand that if I do not receive my bill, it is uary, April, July, and October) as well as any late derstand it is my responsibility to notify the Village o opt out of e-invoicing, I understand I must notify	S
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Signatu	ure		Date	
FOR O	FFICE USE ONLY:			
Start D	Pate	Initials	5	