



City of Berlin Water & Sewer Utilities

108 North Capron St • P.O. Box 272 • Berlin, Wisconsin 54923-0272
(920) 361-5404 • (920)361-5406 Fax: (920) 361-5454

Account Information:

Date: _____

This is a statement stating that I am responsible for the Water & Sewer bill
payment at _____ (property address) in the City of
Berlin effective _____ (date).

Signatures of responsible party or parties:

Printed name of responsible party or parties:

Contact phone number:

Meter Information (Required if Apartment)

Landlord Signature: _____

Landlord Printed Name: _____

*Landlord is responsible for bill when in between renters. *

**Failure to return this form completely fill out to the Water & Sewer Department
will result in the bill staying in the Landlords' name. **

