



# RESIDENTIAL SERVICE APPLICATION

Date Entered by MGE

There are three ways to complete this application:

- 1. Save paper, save time! Complete the application online at: [www.mge.com/startservice](http://www.mge.com/startservice)
- or 2. Complete the application and fax to: (608) 252-4714
- or 3. Complete the application and mail to: Customer Center, Attention: RA

Madison Gas and Electric Company  
 PO Box 1231, Madison WI 53701-1231

Important: To safeguard your Madison Gas and Electric Company (MGE) account information and prevent identity theft, please fill out this form completely. We may deny your application for service if any required fields are left blank. If you have questions, please call (608) 252-7222 or 1(800) 245-1125.

(\*) Required fields for this form

### Section 1 - New Applicant Information

Full Legal Name of Person Responsible for Billing\*

- Mr.
- Mrs.
- Ms.

Last Name

First Name

MI

Provide at least one form of identification in the area to the right.\*

Social Security Number (full or last four digits)

Driver's License Number

Issuing State

State Identification Number

Passport

Attach a copy of your passport.

Employer

School (if student)

Date of Birth\*\* (MM/DD/YYYY)

Contact Phone\*\*

Work Phone

Full Legal Name of Spouse

Last Name

First Name

MI

Employer/School

Contact Phone

### Section 2 - Previous Address of Person Responsible for Billing

Previous Address\*\*

Apt. Number

City\*\*

State\*\*

ZIP\*\*

Does MGE service need to be turned off at previous address?\*

- Yes
- No

If yes, date service needs to be turned off \*\*

Permanent Address (if student)

City

State

ZIP

### Section 3 - New Service Address Information

Service Requested

- Both Gas and Electric
- Electric
- Gas

Date Service Starts\*\*

New Service Address\*\*

8-15-20

Apt. Number

City\*\*

ZIP\*\*

Mailing Address (if different than service address)\*\*

Apt. Number

City\*\*

State\*\*

ZIP\*\*

Applicant's Signature\*\*

Date

### Section 4 - Property Owner and/or Management Company Information

Property Owner

Owner/Management Company Name

Rouse Management

Address

921 Fahrenbrock Court

City

Madison

State

WI

ZIP

53715

Management Company

Work Phone

(608) 255-4744

Fax

(608) 255-4870

Contact Person

Shannon Redder

Phone

(608) 255-4744

Contact Person E-Mail Address

Shannon@rousemgmt.com