



City of Berlin

Water & Sewer Utilities

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

Signature of responsible party or parties:

Printed name of responsible party or parties:

Contact phone number:

Meter reading (optional): _____

Landlord Signature: _____

Landlord Printed Name: _____

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

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

