

Sewer Information Request Fee: \$15.00

Village of Wales Sewer Utility No.1

Date Requested For:		Department	Sewer
Property Address:		Send fulfilled request via:	<input type="checkbox"/> Email Address: _____ <input type="checkbox"/> Mailing Address: _____ _____ _____

For Office Use: _____

Account number	Outstanding
Date of Last Bill	Amount Owed:
Next Billing Date:	*Estimated Amount Owed to
Signature	Date Requested:
	Estimated
	Quarterly Use:

*Billings are done quarterly

Current rates:

Volume Charge: \$_____ per thousand and can only be estimated for future date

Meter Fee: \$_____ residential \$_____ commercial

Rec Charge: \$_____ residential \$_____ commercial

Please mail request and check to:

Village of Wales

Attn: Utility District

PO BOX 47

Wales, WI 53183

Email: administrator@villageofwales.gov

262-968-3968 telephone

262-968-5649 fax