



City of Madison Residential Connection Rebate Application



Please read program rules before submitting.

Applicant Information

Name (please print) _____

Address _____

City _____ State _____ Zip _____

Telephone Number – Home _____ Work/Cell _____

Water Service Connection Information

Date of connection: _____ Distance from curb stop to exterior wall: _____ (feet)

Cost to connect to municipal water (attach receipts): _____

Name of licensed contractor who made the service connection: _____

Date of well abandonment: _____

Name of licensed well driller or pump installer who abandoned the well: _____

Residential Connection Rebate Agreement

I have read and understand the terms and conditions of the Residential Connection Rebate Program. By signing this form, I certify that the service connection was made and the well formerly located at the above mentioned address was abandoned by a licensed well driller or pump installer according to requirements of Wisconsin Administrative Code, Chapter NR 812. I further certify that the requested amount is for actual out-of-pocket expenses only.

Applicant Signature _____ Date _____

Water Utility Use Only:

WQ App _____ Fin App _____ Amt _____ Date _____