



# Application to Modify Water Mains/Services

City of Madison Water Utility

119 East Olin Avenue • Madison, WI 53713 • 608-266-4646

[www.madisonwater.org](http://www.madisonwater.org)

Email applications to: [serviceapplications@madisonwater.org](mailto:serviceapplications@madisonwater.org)

## Contact Information

Applicant: \_\_\_\_\_

Billing Address: \_\_\_\_\_  
Street Address City State ZIP

Phone: \_\_\_\_\_

Onsite Contact Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Email Address: \_\_\_\_\_

## Property Information

**Legal description of the property to be served:**

Address: \_\_\_\_\_

Parcel #: \_\_\_\_\_

## Project Information

Material: Ductile Iron Copper

Please select one of the following options:

Service Type: Live Tap Cut In

ROW Permit Permit #: \_\_\_\_\_

Development Agreement

Main Size: \_\_\_\_\_ Lateral Size: \_\_\_\_\_

**Exact description of planned work:**

**In order to determine a deposit amount, a site utility plan or drawing must be submitted with this application.**

The undersigned Property Owner and Contractor hereby make application to the City of Madison for the work described above and agree to comply with all applicable rules and regulations of the PSC of Wisconsin and Madison Water Utility. Unauthorized connections to the public water supply system may result in disconnection and/or citation according to MGO Chapter 13. Please allow 3 business days for review/ deposit estimate and 3 business days' notice before scheduling work or inspection. Work may not begin until deposit is submitted.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Office Use Only:**

Approval Date/Initials

Amount Paid

PIV #

Notice: Applications expire two years from date of approval. Refunds will not be issued after the expiration of the application.

Form Version 10/2025