



**TOWN OF URBANNA**  
**Post Office Box 179**  
**Urbanna, Virginia 23175**  
**WATER SERVICE AGREEMENT**  
**RENTERS**

Print Name \_\_\_\_\_

Property Address \_\_\_\_\_

Mailing (Billing) Address: \_\_\_\_\_

Primary Phone ( ) \_\_\_\_\_ Optional Phone ( ) \_\_\_\_\_

E-Mail: \_\_\_\_\_

Effective date: \_\_\_\_\_

***Renters must provide the following:***

Property Owner Authorization Form

Security Deposit:                      Residential - \$225.00  
    Commercial - \$500  
    Restaurant - \$1,000.00

I hereby apply to the Town of Urbanna (herein known as "Town") for water service. I understand:

- That such service is to be provided subject to the rules, regulations, ordinances, terms and conditions as may be established now **or in the future** by the Town. I agree to provide a current mailing address and inform the Town in writing of any changes.
- I agree to pay any and all fees and charges associated with provision of such service in accordance with the rules, regulations, ordinances, terms and conditions as may be established now or in the future by the Town.
- I understand that my water service may be discontinued for any of the following reasons:
  - Nonpayment of water bill after sixty (60) days. Property owner will be notified.
  - Tampering with service connections/meter.
  - Failure to permit inspection of service connections or meter readings or interference or obstruction of the Town in rendering service or repairs.
  - Noncompliance with any provision of Chapter 15.1 of the Urbanna Town Code (1973), as amended, relating to water and water utility service.
- I further agree to pay any and all cost incurred by the Town including attorney fees, collection agency fees, and post-judgment interest at the maximum rate permitted by law.

**EMERGENCY NOTIFICATION SERVICE** – URBANNA OFFERS A NOTIFICATION SERVICE TO CUSTOMERS TO INFORM IN THE EVENT OF WATER OUTAGES AND OTHER PUBLIC SERVICE MESSAGES. WOULD LIKE TO UTILIZE THIS SERVICE? \_\_\_\_\_ Yes \_\_\_ No

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Office Use

Deposit Amount \_\_\_\_\_ Receipt No. \_\_\_\_\_ Date Received \_\_\_\_\_ By \_\_\_\_\_



**PROPERTY OWNER AUTHORIZATION FOR NEW TENANT**

**Property Information**

**Property/Service Address:** \_\_\_\_\_

**Date Lease Effective:** \_\_\_\_\_

**Provider Information**

**Water Services:** Provided by the Town of Urbanna – 390 Virginia St., Suite B, Urbanna, VA 23175  
Mailing address: PO Box 179, Urbanna, VA 23175

**Sewer Services:** Provided by Hampton Roads Sanitation (HRSD) – P.O. Box 71092, Charlotte, NC 28272  
Payments mailed to: HRUBS, PO Box 37097, Boone, IA 50037

**Tenant Information**

**New Tenant(s):** (please list the full names of all tenants on the lease for the property)

*Print Name(s):*

\_\_\_\_\_  
\_\_\_\_\_

**Property Owner Information**

**Property Owner(s):** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**E-mail:** \_\_\_\_\_

**Home Phone:** \_\_\_\_\_ **Cell Phone:** \_\_\_\_\_

**Authorization**

**Owner seeks a waiver of the security deposit requirement from the tenant due to the tenant’s receipt of rental assistance from local, state, or federal agencies. Supporting documentation must be provided and attached to this authorization form. Yes \_\_\_ No \_\_\_ The above person(s) has/have entered into a lease for the above property and is/are authorized to obtain water and sewer services at this address from the Town or Urbanna and/or its agent as my tenant/tenants. I agree to pay the Town of Urbanna and/or HRSD all outstanding balances of Tenant to avoid disconnection of service at any time.**

\_\_\_\_\_  
Signature of Property Owner(s)

\_\_\_\_\_  
Date