



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

**PROPERTY OWNER**

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

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

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

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

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

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

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.
  - 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 understanding that failure to pay outstanding balances could result in a lien being placed on my property.

**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

Date Received \_\_\_\_\_ By \_\_\_\_\_