



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 () _____

SSN: _____

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