

OWNER AUTHORIZATION FOR TENANT UTILITY SERVICE

Town of Stephens City, Virginia
1033 Locust Street, PO Box 250, Stephens City, Virginia 22655
Phone: 540-869-3087 Fax: 540-869-6166

Date of authorization: _____

Address of Property: _____

Name of Tenant: _____

To whom it may concern:

_____ has entered into a lease for the property
Name/names of tenant(s) (please print)

located at _____, Stephens City, Virginia and is hereby
authorized to obtain water and sewer services at this address as a tenant of

Owner of property (please print)

Owner's Address: _____

Owner's Phone: _____

I hereby acknowledge that I have been informed that outstanding water and sewer bills and any penalty and interest thereon shall constitute a lien against the property ranking on a parity with liens for unpaid taxes as set forth in Section 15.2-2119 and 15.2-5139 of the Code of Virginia if, after proper notification, the amount is unpaid after thirty (30) days. I hereby agree to abide by and comply with the Town's established water and sewer policies.

Signature of Property Owner or
Signature of Management Company or authorized representative
with properly executed Power of Attorney from Owner