Dinwiddie County Water Authority

23008 Airpark Drive North Dinwiddie, Va. 23803-6926 Tel. (804) 861-0998 Fax (804) 861-4270

Policy for Opening an Account

If you **OWN** the property, you will need to provide the following information at the time of account set-up:

- 1. Copy of the Deed The account will be put in the name(s) listed on the deed.
- 2. Copy of the Hud-1 document
- 3. Letter on the closing company's letterhead stating property has been closed. Must state name and address of sellers, buyers, and the date of the property closed.
- 4. Current Driver's license or other valid photo ID for each person on the account.
- 5. Social Security card for each person on the account.
- 6. \$25.00 non-refundable account set-up fee.
- 7. Dinwiddie County Water Authority application for service.
- 8. Each person on the deed must sign the application.
- 9. Owner's Authorization Letter advising a lien will be placed if bill not paid must be signed by owner(s).

If you are **RENTING** the property you will need to provide the following information at the time of account set-up:

- 1. Copy of a Fully Ratified Lease. The account will be set up in the name(s) listed on the lease. In the event the tenant wants to move in prior to the date stated on the lease, then the tenant must provide written permission from the landlord stating the date the tenant may have water service activated at the property.
- 2. Current Driver's License or other valid photo ID for each person on the account.
- 3. Social Security Card or Social Security verification may be used.
- 4. \$25.00 Non-Refundable account set-up fee
- 5. Minimum of \$150.00 Security Deposit. This deposit is not interest bearing and any credit balance over \$5.00 remaining will be refunded after the final bill has been paid. (Deposit may vary based on previous account history with DCWA).
- 6. Dinwiddie County Water Authority application for service.
- 7. Each person on the lease must sign the application.
- 8. Owner's authorization letter (owner/tenant letter) advising lien will be placed if tenant does not pay the bill must be completed, signed, and dated by owners(s).

Approved by:
Date:

Application for Service Dinwiddie County Water Authority

Customer Information:					
Name:	SSN#:				
D.O.B.:	Drivers License #:				
Employer:			•		
Co-Applicant:	SS1	· · · · · · · · · · · · · · · · · · ·			
D.O.B.:	Drivers License	·			
Employer:					
Service Address:					
Billing Address:					
Telephone: Home:	Work:	Cell:			
Email Address:			was promo name name name name name name		
It is very important that major water leaks that ma	t we have a current phone a ay occur on the above prope	number so that we may certy.	ontact you in case of any		
Property Owner:					
Address:					
Telephone:					
Deposit Information:					
Application Fee :	(non-refundable) Deposit	required:			
*Applicant Signature:					
*Co-Applicant Signature:					
Authority's Official Signatur	e:				

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Social Security Verification Form

Name:	(full legal name)		
Social Security Number:			
Date of Birth:	<u>_</u>		
Place of Birth:	(State)		
Mathar's Maiden Name	ſſ	ast name only)	

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OWNER AUTHORIZATION LETTER FOR INITIAL SERVICE

Date:			
Owner:	Phone:		_
Address:			
Service Address:			
Dinwiddie County Water Authority On (date)			
On (date) To your real property designated by	y current address listed	above.	
Please be advised that a lien will be an fees, rents or other charges when continue to accrue charges as long	n due for the Authority'	s services. Please be adv	law if said owner fails to pay vised that the account will
Signature:			
Co-owner signature (if any):			
	Dinwiddie County V	Water Authority	

By:____

Date:

Date:____ To: Dinwiddie County Water Authority 23008 Airpark Drive Petersburg, VA 23803 This completed form may be mailed or delivered to the Authority at the above address, sent by facsimile to (804)861-4270, or scanned and emailed to email@dcwa.org. Re: [Insert full name of tenant(s) and address] To the Dinwiddie County Water Authority: The above tenant(s) has/have entered into a lease or rental agreement for the property located at the stated address and is/are authorized to obtain services at said address as a tenant of the undersigned, who are all the owner(s) of the property. I/we understand that if the tenant does not pay the full amount of delinquent charges, with penalty and interest, within two months after the due date, a lien may be placed on the property if I/we do not then pay same within 30 days after notice to me/us. I/we request that, in lieu of mailing, notices and information be sent to me/us by facsimile to #_____ or by e-mail to . Signed: Signed: Type or print name and address of owner: Type or print name and address of owner:

OWNER'S AUTHORIZATION FOR WATER/SEWER SERVICE IN NAME OF TENANT

dcwa-owner authorization 7/1/12