IREDELL WATER CORPORATION

DOCUMENTATION OF ORAL LEASE

Tenant Name(s): _____

Include all adult tenant names.

Service Address: _____

Date Occupancy begins: _____

I/we hereby affirm that I/we am/are the owner of the above property and have leased it to the parties above who will be responsible for water charges.

I/we understand that the tenant is responsible for notifying Iredell Water Corporation when the tenant leaves. If the tenant leaves without my/our knowledge, Iredell Water Corporation will terminate the water service when they determine the residence is abandoned or water bill becomes past due.

I/we understand that if there is no active account at the property for 12 consecutive months, Iredell Water Corporation will remove the water meter and there will be a charge to reinstall said meter to reactivate water service listed on the current Schedule of Fees.

I/we understand that this form is required to establish authority for the person(s) named below to set up water service at the above location.

Property Owner Name(s):_____

Owner 1 Date of Birth: _____ Last 4 digits SS #: _____

Owner 2 Date of Birth: _____ Last 4 digits SS #: _____

This information is requested to establish identity

Owner Address: _____

Owner Daytime Contact Number: _____

Owner email address: _____

_____	_____
Owner 1 Signature Date	Owner 2 Signature Date
_____	_____
Printed Name	Printed Name
_____	_____
Title if signing as representative of owner or business entity	*Title if signing as representative of owner or business entity*

Office use only: *Account number:*_____ *Location number:*_____