

TOWNSHIP OF VERONA
COUNTY OF ESSEX, NEW JERSEY



600 BLOOMFIELD AVENUE
VERONA, NEW JERSEY 07044
WATER/SEWER Office 973-857-4798

Landlord-Tenant
Water and Sewer Billing Authorization

Property Location: _____

Water & Sewer Account Number: _____

Please type or print legibly

Tenant's Name: _____

Mailing Address: _____

Phone Number: _____ Email: _____

I agree to have billing for the above referenced account put into my name. I understand that upon termination of the lease, it is my responsibility to request a final water reading and to terminate this agreement.

Tenant's Signature

Date

As the property owner, I am authorizing my tenant to receive this bill. I am aware that I am ultimately responsible as the owner of this liability.

Landlord/Owner's Signature

Date

Landlord/Owner's Name (print)

Phone

Please complete and return to: Township of Verona-Finance Department
Water/Sewer Department
600 Bloomfield Ave.
Verona, New Jersey 07044
Email: revenuecollection@veronanj.org