



VIRGIN ISLANDS WATER AND POWER AUTHORITY
 P. O. BOX 1009, Christiansted, St. Croix, VI 00821-1009
 TELEPHONE: (340) 773-2250 (STX)
 P. O. BOX 1450, Charlotte Amalie, St. Thomas, VI 00804-1450
 TELEPHONE: (340) 774-3552 (STT) / (340) 776-6446 (STJ)



INSTRUCTIONS: THIS FORM MUST BE NOTARIZED BY THE LANDLORD & BE ACCOMPANIED BY A COPY OF LANDLORD'S DEED OR OWNERSHIP DOCUMENTS TO THE PREMISES FOR WHICH WATER/ELECTRIC SERVICES ARE BEING SOUGHT.

CUSTOMER: If you do not have a valid written lease or it has been deemed unacceptable by VIWAPA, or you are unable to provide VIWAPA with a copy of your Lease Agreement, completion and notarization of this form is required by your landlord or the owner of the leased premises.

I am applying for (select service): _____ ELECTRIC _____ POTABLE WATER

LANDLORD: I hereby certify that the person(s) listed below is occupying, by my authorization, the following premises:

TENANT'S NAME: _____

SERVICE ADDRESS: _____

EFFECTIVE DATE: _____ **TELEPHONE NO.** _____

FORMER TENANT'S NAME: _____

METER NUMBER(S) AT LOCATION: _____

OWNER/LANDLORD'S NAME: _____

MAILING ADDRESS: _____

PHONE NUMBER(S): _____ **(HOME)** _____ **(OTHER)**

OWNER/LANDLORD: _____
 (SIGNATURE)

On this _____ day of _____, _____, before me, the undersigned officer, personally appeared _____, known to me (or satisfactorily proven) to be the individual whose name is subscribed to the foregoing instrument as landlord; and he/she acknowledged to me that he/she executed the same freely and voluntarily for the uses and purposes therein contained.

SUBSCRIBED TO AND SWORN before me, the undersigned officer, this _____ day of _____, _____.

 NOTARY PUBLIC

My Commission Expires: _____