



*Township of Verona*

600 Bloomfield Avenue  
VERONA, NEW JERSEY 07044

TAX OFFICE

857-4777

DATE: \_\_\_\_\_

**LANDLORD-TENANT  
WATER AND SEWER AUTHORIZATION**

Property Location: \_\_\_\_\_

Please type or print legibly

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
\_\_\_\_\_

Phone Number: \_\_\_\_\_

Water & Sewer Account Number: \_\_\_\_\_

\_\_\_\_\_  
Tenant's Signature

\_\_\_\_\_  
Date

As Property Owner, I am authorizing my  
Tenant to receive this bill. I am aware  
that I am ultimately responsible as  
the Owner for this Liability.

\_\_\_\_\_  
Landlord/Owner's Signature

\_\_\_\_\_  
Date

Please complete and return to: Township of Verona  
Sewer/Water Department  
600 Bloomfield Ave.  
Verona, New Jersey 07044