



POST OFFICE BOX 1107 • DUNN, NORTH CAROLINA 28335  
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www.dunn-nc.org

**Mayor**  
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April L. Gaulden  
Frank McLean  
Billy Tart  
Dr. David L. Bradham  
**City Manager**  
Steven Neuschafer

## Property Owner Verification Form

Property Owner Name(s): \_\_\_\_\_

Property Owner Mailing Address: \_\_\_\_\_

Property Owner Telephone Number: \_\_\_\_\_

Last 4 digits SS#: \_\_\_\_\_  
*This information is requested to establish identity*

Account#: \_\_\_\_\_ Service Address: \_\_\_\_\_

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

I/we understand that the tenant is responsible for notifying the City when the tenant leaves. If the tenant leaves without my/our knowledge, the City will terminate the water and/or sewer service when they determine the residence is abandoned.

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

Tenant Name(s): \_\_\_\_\_

Date Occupancy begins: \_\_\_\_\_

\_\_\_\_\_  
Signature of Owner                      Date

\_\_\_\_\_  
Signature of Tenant                      Date

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Printed Name



*where community matters*

