Virginia Low Income Household Water Assistance Program (LIHWAP) Landlord Verification Form

Return form to tenant to include with application or mail to: VA LIHWAP - Promise, PO Box 2218, Richmond, VA 23218 For help, call Promise (LIHWAP Administrator) at 1-888-373-9908

Your renter is seeking water assistance and has informed us that the property you own or manage also administers billing on behalf of the drinking water/wastewater utility for the units. Please verify the information below to identify the method for which the tenants at your property are responsible for drinking water/wastewater utility costs.

The completion of this form is necessary for us to process the household's application and issue the LIHWAP benefit to the water vendor.

Application information						
Applicant / tenant name			Telephone number			
Property address		City		State	Zip	
Landlard / Managar nama		Tolon	hono numbor			
indlord / Manager name		_ Telephone number City				
Address	_ (JILY _				
Is the tenant's water and/or waste water included in the rent?			Water: 🗌 Yes 🗌 No	Wastewater	": 🗋 Yes 🔲 No	
Is the tenant's water or wastewater service disconnected for a past due bill?			Water: 🗌 Yes 🗌 No	Wastewater: 🗌 Yes 🔲 No		
Is the tenant in danger of disconnection for a past-due water or wastewater bill?			Water: 🗌 Yes 🔲 No	s ☐ No Wastewater: ☐ Yes ☐ No		
Cost of water (or water+wastewater if combined) charged in monthly rent			Cost of wastewater (if separate)			
Water provider (or Water + Wastewater if combined) Wa	Wastewater provider (if separate)					
Service provider Se	Service provider					
Account number Acc	Account number					
Name on account Na	Name on account					

If the applicant/tenant receives LIHWAP assistance, I agree to reduce the rental payment by that amount for the following month.

Landlord / Manager signature _____

Date ____