

## Adopt-A-Stream

Application for Local Program Designation and Agreement

As stewards of the Commonwealth's water resources, we request permission to adopt a \_\_\_\_\_  
mile segment of \_\_\_\_\_ located in Town, in the \_\_\_\_\_  
watershed.

Location Description (Please provide county road map, if available): \_\_\_\_\_  
\_\_\_\_\_

Name of Adopting Organization: \_\_\_\_\_

Number of stream cleanups per year (one required/two recommended): \_\_\_\_\_

Designated Representative (**Primary**) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Telephone Number (daytime) \_\_\_\_\_ Email \_\_\_\_\_

Address \_\_\_\_\_

Designated Representative (**Secondary**) \_\_\_\_\_

Street Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Zip \_\_\_\_\_ Telephone Number (daytime) \_\_\_\_\_

Email Address \_\_\_\_\_

The work will be performed under and in accordance with the Town of Warrenton, Virginia Adopt-A-Stream Program Conditions and Safety Guidelines, incorporated herein by reference. Applicants to whom a Virginia Adopt-A-Stream Program Designation and Agreement are issued shall at all times indemnify and save harmless the Town of Warrenton, the Commonwealth of Virginia, and all Town employees, agents and officers, from responsibility, damage, or liability arising from the exercise of the privileges granted under designated programs. The Program Designation and Agreement may be terminated by the Town at any time. The Town reserves the right to revise or discontinue the Adopt-A-Stream Program at any time.

***As a designated representative of, \_\_\_\_\_, I have read, understand, and shall comply with the Adopt-A-Stream Program conditions and safety guidelines regarding participation in the program.***

***Signature*** \_\_\_\_\_ ***Date*** \_\_\_\_\_

Mail to: Town of Warrenton Adopt-A-Stream Program, 360 Falmouth Street, Warrenton, VA 20186, email: [rbattaglia@warrentonva.gov](mailto:rbattaglia@warrentonva.gov) Fax#: (540) 349-8339