

The top section is for the seller to fill out with the account number and their printed name(s) and then sign on the provided signature lines. If the account is an inherited account then the owners should be listed as "Heirs of <Original Owner>" and all of the heirs should sign the top section.

The middle section is for the buyer to fill out with the address to which the monthly bill should be sent, their telephone number, and then sign on the provided signature lines. The bottom section is for the district to fill out upon approval. Your account must be current in order to transfer water rights.

Return the filled out enclosed form to:

Wilson County RWD 11
PO Box 386
Fredonia, KS 66736

Or email to wcrwd11@gmail.com

The Board will review the transfer at the next monthly meeting. You can review the bylaws of the water district at <http://ruralwaterdistrict11.com>. The current monthly rates are: Meter fee \$30 plus \$10.85 per 1,000 gallons of water used. A 10% late charge is added for payments made after the due date of the 15th of the month.

RURAL WATER DISTRICT NO. 11
WILSON COUNTY, KANSAS

ASSIGNMENT

FOR VALUE RECEIVED, the undersigned _____
Seller(s)

_____, the owner(s) of Benefit Unit No. _____ of Rural Water District No. 11, Wilson County, Kansas, hereby assigns, conveys, and transfers said Benefit Unit.

Premise Address
Address _____
City _____
Zip Code _____

Signature

Signature

ACCEPTANCE OF ASSIGNMENT

Buyer(s)

the assignee(s), hereby accepts the Assignment to (him, her, them) of the above described Benefit Unit and agree(s) to assume and be bound by all of the obligations imposed upon the holder of such Benefit Unit by the Bylaws and Rules and Regulations of Rural Water District No. 11, Wilson County, Kansas.

Billing Address:

Signature

Signature

Telephone # _____

CONSENT TO ASSIGNMENT OF BENEFIT UNIT

Pursuant to approval of the Board of Directors of Rural Water District No. 11, Wilson County, Kansas, said Rural Water District hereby consents to and approves the transfer of the above-mentioned Benefit Unit from _____

to _____
and agrees to furnish water service to the assignee(s) upon the same terms and conditions that service was furnished to the assignor(s).

RURAL WATER DISTRICT NO. 11
WILSON COUNTY, KANSAS

Date

By: _____
Chairman

ATTEST:

Secretary