

ALPINE WATER & SANITARY DISTRICTS

P.O. Box 595 - 11 County Road 2052 - Alpine, AZ 85920

Phone: (928) 339-4631

Fax: (928) 339-4302

Email: shawna@alpinewaterandsewer.net
ronda@alpinewaterandsewer.net

OWNER TRANSFER OF SERVICES

PREVIOUS OWNER

Service Address: _____

Account Number: _____

Name: _____

Billing Address: _____

City/Town: _____ State: ____ Zip Code: _____

Phone Number(s): _____

NEW OWNER

Account Number: _____

Name: _____

Address: _____

City/Town: _____ State: ____ Zip Code: _____

Phone Number(s): _____

Email address: _____

I, _____, hereby request services from the Alpine Sanitary District and/or the Alpine Domestic Water Improvement District. I understand that said services shall be governed by the rules and regulations of the Districts and the laws of the State of Arizona. I hereby agree to abide by said rules, regulations and laws. I understand that sewer and/or water service shall remain in my name and it shall be my responsibility to pay all sewer and/or water bills and assessments of the Alpine Sanitary District and/or Alpine Domestic Water Improvement District promptly. I further agree to allow the Districts to file a lien on my property, in the event I fail to pay any debt to the Districts.

Stakeholder Signature: _____ Date: _____

Information received by: _____

\$28.00 Transfer Fee paid on: _____ Check No. _____