

**RIM TRAIL DOMESTIC
WATER IMPROVEMENT DISTRICT**

TRANSFER REQUEST AND APPLICATION FOR SERVICE

All transfers & Applications for Service Subject to the Terms and Conditions of the District's Current Rules and Regulations

Lot #: _____	Parcel #: _____															
Requested Transfer Date: _____ <small>(The requested date must be at least 10 days after this Form is Submitted. If the District cannot do the meter reading on the requested date, it will be done as close to the requested date as reasonably possible.)</small>	<table style="width:100%; border-collapse: collapse;"> <tr> <td style="width:15%;">FEES</td> <td style="width:60%;">Transfer Fee</td> <td style="width:25%; text-align: right;">\$100.00</td> </tr> <tr> <td></td> <td>Security Deposit</td> <td style="text-align: right;">\$250.00</td> </tr> <tr> <td colspan="3">Total Payment of \$350.00 must be submitted with the Form</td> </tr> <tr> <td colspan="3">Make Checks payable to RTDWID. Mail to R. T.D.W.I.D.,</td> </tr> <tr> <td colspan="3">240 E. Box Elder Ln., Payson, AZ 85541</td> </tr> </table>	FEES	Transfer Fee	\$100.00		Security Deposit	\$250.00	Total Payment of \$350.00 must be submitted with the Form			Make Checks payable to RTDWID. Mail to R. T.D.W.I.D.,			240 E. Box Elder Ln., Payson, AZ 85541		
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TO BE COMPLETED BY CURRENT PROPERTY OWNER & CURRENT CUSTOMER (SELLER)

CURRENT PROPERTY OWNER <small>Full Legal Name(s) of the current Record Owner(s) of the Property (individuals) or a legal entity)</small> <hr/> Contact Person For an Entity _____ <hr/> Mailing Address _____ <hr/> Emergency Contact Information: Daytime Phone: _____ Evening Phone: _____ Email: _____ → <i>I understand that I will remain fully liable for all obligations to the District incurred before the Transfer is approved and implemented by the District.</i> <hr/> Signature _____ Title if applicable: _____ Date: _____	CURRENT CUSTOMER <small>(complete only if the current Customer is a renter or someone else who is not the current property owner.)</small> <hr/> Name _____ Mailing Address _____ <hr/> Emergency Contact Information: Daytime Phone _____ Evening Phone _____ Email _____ → <i>I understand that I will remain fully liable for any obligations to the District incurred before the Transfer is approved and implemented by the District.</i> <hr/> Signature _____ Date: _____
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TO BE COMPLETED BY NEW PROPERTY OWNER & NEW CUSTOMER (BUYER)

NEW PROPERTY OWNER <small>Full Legal Name(s) of the current Record Owner(s) of the Property (individuals) or a legal entity)</small> <hr/> Contact Person For an Entity _____ <hr/> Mailing Address _____ <hr/> Emergency Contact Information: Daytime Phone: _____ Evening Phone: _____ Email: _____ → <i>I understand that I will remain fully liable for all obligations to the District incurred before the Transfer is approved and implemented by the District.</i> <hr/> Signature _____ Title if applicable: _____ Date: _____	NEW CUSTOMER <small>(complete only if the current Customer is a renter or someone else who is not the current property owner.)</small> <hr/> Name _____ Mailing Address _____ <hr/> Emergency Contact Information: Daytime Phone _____ Evening Phone _____ Email _____ → <i>I understand that I will remain fully liable for any obligations to the District incurred before the Transfer is approved and implemented by the District.</i> <hr/> Signature _____ Date: _____
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TO BE COMPLETED BY DISTRICT

Does the District need to obtain any recordable easements for this Lot before approving the Transfer Yes ___ No ___	Meter No.	Date Read	Meter Reading
	_____	_____	_____