



Muskogee County Rural Water

District # 3

PO Box 173/105 S Broadway

Council Hill, OK 74428

Phone 918-474-3773 - Email murwd3@yahoo.com

Tap # _____

CUSTOMER TRANSFER AGREEMENT

Transfer Fee \$75

The Undersigned hereby agrees to the following conditions:

1. This Benefit Unit Membership entitles the owner thereof to not exceed ONE waterline from the District's water system and such line shall serve only ONE residence or business establishments, together with the necessary and usual outbuildings. If you add another home or business, you must apply for a second membership. All illegal connections will incur a fee as set by the district.
2. Customer agrees to assume and be bound by all the obligations imposed upon the holder of such Membership by the Bylaws and Rules and Regulations of Muskogee County Rural Water District #3.
3. The Benefit Unit Member follows the title of the land unless the owner of the land designates otherwise. All charges levied against the Membership Account must be paid BEFORE the membership can be transferred to a new owner. This Membership CANNOT be transferred to another location without the approval of the Board of Directors of said Rural Water District.
4. The Water District will cause members' meters to be read monthly and mail a bill to member listed on the account around the 27th of each month. Payment of the bill is to be made not later than the 20th of the month. Bills not paid or with balances of that equal to the minimum charge will be assessed a late fee of 10% + \$10 after the 20th of the month. Water service is subject to be disconnected if not paid 45 days after the billing date. In the event of a shut off there is reset fee. Any meter requested to be reset after 5pm, weekends & holidays will be assessed an additional reset fee which is payable to the District. ***IF YOU DO NOT RECEIVE YOUR BILL BY THE 5ST OF THE MONTH, CONTACT OUR OFFICE.***
5. This Benefit Unit Membership shall entitle the owner thereof to one service connection for the following property located in _____ County, Oklahoma. **LEGAL DESCRIPTION OF PROPERTY BEING:**

Please attach a copy of your **filed deed**.

6. Representative of the District or the State and Local Health Department shall have the right at all reasonable hours to enter upon consumer's premises for the purpose of inspection and enforcement of these provisions.

Owner (PLEASE PRINT)

Owner's Signature

Date

Phone Number: _____

Email: _____

Physical Address: _____

Mailing Address: _____

OFFICE USE ONLY

Tap#: _____

Meter Reading: _____

Transfer Fee - \$75.00 _____

Approved: _____

Chairman's Signature _____

Date _____

Transferred from: _____

Transferred to: _____