RURAL WATER DISTRICT NO. 8 MCCLAIN COUNTY, OKLAHOMA

P.O. BOX 129, Wayne OK 73095

PHONE (405) 449-7700 FAX (405)449-3128

WATER SERVICE TRANSFER

ACCOUNT NUMBER:					
PRESENT OWNER:					
NEW OWNER:				Date:	
Mailing Address:					
ity:State:		Zip:	Phone	Phone #:	
Location of Property:					
Specify use of meter: Resi	dence	Pasture	Business	Commercial	
Marijuana Cultivation	Other				
If residence, specify how n	nany in househol	ld: Adults (18	& Up):	Children:	
Number of Gallons of Wat	er to be used dai	ily, n	neter sized deterr	nined by usage.	
Please indicate CDIB info	ormation. It will	help in receiv	ing grants for sy	stem improvements.	
CDIB Indian Card? Yes: _	No:	_ If Yes, CD	<i>'B #</i>		
approval hereof, I/we will comply we all fees, assessments, and other lawf	ith and be bounds by a ful amounts chargeable	ll Rules and Regula to the member. Pl	tions of McClain Coun ease contact our offi	service, and hereby agrees, That upon ty Rural Water District # 8 and agree ce during business hours for any EFORE TRANSFER IS APPRO	to pay
Members Signature			Date		
STATE OF OKLAHOMA					
On this da	ay of	,,	the undersigned a	Notary Public in and for	
known to be identicated	al person who exec	cuted the within	and forgoing instr	nument and acknowledged to research purposed therein set for	ne
In witness wit	whereof, I have se	t my hand and o	official seal the day	and year last above	
My commission expires:			Notary Public		