

Account Transfer Authorization

Wellborn Special Utility District
P. O. Box 250
Wellborn, Texas 77881
979-690-9799

TRANSFEROR and TRANSFEREE understand that the transfer cannot be completed until **ALL** of the following conditions have been met:

1. All information on this form is complete, accurate and signed by TRANSFEROR and TRANSFEREE;
2. The TRANSFEREE has applied for service and paid any applicable fees;
3. The transfer has been approved by the Wellborn Special Utility District.

TRANSFEROR: The TRANSFEROR understands that he relinquishes all rights to a deposit refund. **The TRANSFEROR understands that any unpaid balance or any unbilled water usage until date of transfer on this account is the responsibility of the TRANSFEROR.**

Transferor's Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone: _____ Date of Transfer: _____

Account number _____ Date: _____

Signature of Transferor: _____

IT IS THE TRANSFEROR'S RESPONSIBILITY TO OBTAIN A FINAL READING

TRANSFEREE:

Transferee's Name: _____

Street Address: _____

City, State, Zip Code: _____

Phone: _____ Date: _____

Signature of Transferee: _____

****FINAL READING**** _____