

**BETHESDA WATER SUPPLY CORPORATION
PO BOX 130 BURLESON TX 76097-0130**

MEMBERSHIP TRANSFER AUTHORIZATION

Transferor hereby surrenders Membership in the Bethesda WSC by execution of the attached. Water Service rights granted by Membership and other qualification hereby cease contingent upon further qualification of the Transferee in accordance with the policies of the Bethesda WSC.

By execution hereof, the undersigned hereby acknowledges that the Membership Transfer complies with the terms of one of the following items (1) through (4), thereby qualifying for transfer of Membership in accordance with the laws of the State of Texas

- (1) The Membership is transferred by will to a person related to the Transferor within the second degree by consanguinity; or
- (2) The Membership is transferred without compensation to a person related to the Transferor within the second degree by consanguinity; or
- (3) The Membership is transferred without compensation or by sale to the Corporation; or
- (4) The Membership is transferred as a part of the conveyance of real estate from which the Membership arose.

Transferee understands that qualification for Membership is not binding on the Corporation and does not qualify proposed Member for continued water service unless the following terms and conditions are met:

- (1) This Membership Transfer Authorization Form is completed by the Transferor and Transferee:
- (2) The Transferee has completed the required Application Packet:
- (3) All Indebtedness due the Corporation has been paid:
- (4) The Membership Certificate has been surrendered, properly endorsed, by the record Transferor:
- (5) The Transferee demonstrates satisfactory evidence of ownership of the property designated to receive service and from which the Membership originally arose and
- (6) Any other terms and conditions of the Corporation's Tariff are properly met.

Seller Signature

Buyer Signature

Seller Signature

Buyer Signature

Print Transferor's Name

Print Transferee's Name

Forwarding Address

Current Address

City, State, Zip Code

City, State, Zip Code

Phone

Phone

Account Number _____

Location of _____

TRANSFER AUTHORIZATION

ACKNOWLEDGEMENT

The State of Texas
County of

IN WITNESS WHEREOF the said Transferor and/or Transferee have executed this instrument this
_____ day of _____, 20_____.

BEFORE ME, the undersigned, a Notary Public in and for said County and State, on this day
Personally appeared _____
known to me to be the persons whose names are subscribed to the foregoing instrument, and acknowledge
To me that they executed the same for the purposes and consideration therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE THIS _____ day of _____, 20_____.

Notary Public in and for

County, Texas
Commission expires _____

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