

# Files Valley Water Supply Corporation

115 East Main  
P.O. Box 127

Itasca, Texas 76055  
Phone: 254-687-2331  
Fax: 254-687-2428

## MEMBERSHIP TRANSFER AUTHORIZATION

Transferor hereby surrenders Membership in the Files Valley Water Supply Corporation by execution of the attached Stock Certificate. 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 Files Valley Water Supply Corporation.

By execution hereof, the undersigned hereby acknowledges that the Membership Transfer complies with the terms of one on 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 Transfer 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 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 their 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 the 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.

\_\_\_\_\_  
Signature of Transferor

\_\_\_\_\_  
Signature of Transferee

THE STATE OF TEXAS         (

(

COUNTY OF \_\_\_\_\_ (

)

This Instrument was acknowledged before me on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

by \_\_\_\_\_.

\_\_\_\_\_  
Notary Public, \_\_\_\_\_ County

My Commission Expires \_\_\_\_\_

\_\_\_\_\_  
Transferor's Name

\_\_\_\_\_  
Transferee's Name

\_\_\_\_\_  
Forwarding Address

\_\_\_\_\_  
Current Address

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
City, State, Zip Code

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Phone

Account Number \_\_\_\_\_ Final Reading \_\_\_\_\_ Reading Date \_\_\_\_\_

Location of Meter \_\_\_\_\_

**NOTE: A fee of \$25.00 is charged to the Transferee on all Transfers.**

(Optional) Transferor may be due a refund of the Membership Fee and Transferee understands that he/she must place on deposit a refundable Membership Fee with the Corporation.

**ACKNOWLEDGEMENT**

THE STATE OF TEXAS ( )  
COUNTY OF \_\_\_\_\_ ( )

IN WITNESS WHEREOF THE SAID Transferor and 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 acknowledged 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\_\_\_\_\_.

(SEAL)

\_\_\_\_\_  
Notary Public in and for \_\_\_\_\_ County, Texas  
My Commission expires \_\_\_\_\_

**FILES VALLEY WATER SUPPLY CORPORATION, INC.**

254-687-2331  
P O Box 127

Fax: 254-687-2428  
Itasca, TX 76055

Instant contact has become an expected occurrence in today's society and because of the technology today it can be of great assistance in emergency situations. Files Valley would like to be able to **text you or email you** should an emergency situation arise with your water system. Some examples would be a prolonged outage, boil water notice or maybe even a suspected leak on your side of the meter. To enable us to contact you in this manner, we must have your permission. If you are willing to grant us permission for this type of contact, please complete and return the form below.

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Account Number

\_\_\_\_\_  
Email

\_\_\_\_\_  
Mobile Telephone

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Best regards,

Board of Directors  
Files Valley Water Supply Corporation