## **Little Colorado Sanitary District**

## **Transfer of Sewer Service Form**

This form must be completed when ownership of a property connected to the Little Colorado Sanitary District sewer system changes. Both the seller and buyer must sign this form. The completed form may be submitted to the District office or through the website.

Property Information Service Address:	
Parcel Number:	
Seller Information	
Name:	
Mailing Address:	
Phone:	Email:
Buyer Information Name:	
Mailing Address:	
Phone:	Email:
Transfer Details Date of Property Transfer: Effective Date of Service Transfer:	
Seller certifies that all sewer service charges and fees due to the District have been paid in full. Buyer acknowledges responsibility for all future charges from the effective date of trans fer.	
Signatures	
Seller Signature:	Date:
Buyer Signature:	Date:
District Use Only Received by:	Date Received:
Approved by:	Date Approved: