**RURAL WATER DISTRICT #5 LEAVENWORTH COUNTY KANSAS**

**19867 Springdale Road**

**LEAVENWORTH, KS 66048**

PHONE#913-758-0488

EMAIL: rwd5leavenworthctyks@gmail.com

WEBSITE: http;//www.rwd5leavenworthcountyks.com

**PROCEDURE FOR TRANSFERING OWNERSHIP OF WATER SERVICE**

1. The Seller (Patron) or agency should call the District Office, 913-758-0488, to schedule a read out of the meter as soon as they know the closing date and/or the date possession will be given to the new owner. They should provide the buyers’ name(s) and phone number(s), the forwarding address of the Patron, the name/phone number of the real estate agent for both the buyer and the seller and the closing company/agent. If the closing date changes from the date originally given to the office, please call us so we can reschedule the read out.
2. At closing, both the seller (patron) and the buyer need to sign the TRANSFER OF BENEFIT UNIT form. The seller should sign at the section entitled “ASSIGNMENT” and the buyer should sign under “ACCEPTANCE OF ASSIGNMENT”. The signed certificate should be immediately sent to RWD#5 Leavenworth County, 19867 Springdale Road, Leavenworth, KS 66048.
3. The buyer needs to provide a copy of the recorded deed.
4. When all documents are received by the District Office, the transfer will be provided to the Board of RWD#5 for review/approval.

***PER RWD#5 RULES AND REGULATIONS:***

***CONSUMER’S RESPONSIBILITY FOR BENEFIT UNIT***

*It shall be the benefit unit owner’s responsibility to process changes of occupancy and have his/her Benefit Unit transferred to the new landowner. Transfer of Benefit Units shall be permitted under the following conditions:*

1. *The required transfer form, or other legal document supporting ownership, is completed and filed with the District.*
2. *Transfer is from one land owner to a new land owner on the same tract of land.*
3. *Satisfaction of all outstanding charges and fees for water service and /or repairs.*
4. *Completion and signing of a new water users agreement by the new owner.*
5. *Until the unit is formally transferred, the original holder shall be responsible for payment of service. All charges levied against a benefit unit must be paid before the benefit unit can be transferred or service resumed where there has been a suspension.*

**TRANSFER OF WATER BENEFIT UNIT**

**ASSIGNMENT**

FOR THE VALUE RECEIVED, the undersigned \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ the holder(s) of Benefit Unit No. \_\_\_\_\_ of Rural Water District No. 5 Leavenworth County, Kansas, hereby relocates and transfers said Benefit Unit No. \_\_\_\_ to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
Customer Number (Meter #) \_\_\_\_\_\_\_\_\_

Location of Meter/Service Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, state, zip\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SELLER(S) HEREBY STATE ALL WATER BILLS WILL BE PAID BEFORE TRANSFER IS COMPLETED

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Current Patron

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of Current Patron

STATE OF KANSAS

 SS:

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

BE IT REMEMBERED that on this \_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_, before me, the undersigned, a Notary Public, in and for the county and state aforesaid, came \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ who is personally known to me to be the same person who executed this within instrument of writing, and such person duly acknowledge the execution of the same.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my notarial seal the day and year last written.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

My commission expires: \_\_\_\_\_\_\_\_\_\_ Notary Public Signature

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed or Typed Name of Notary Public

The date of closing is \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

The effective date of transfer will be: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

*(Note: you must call for a final meter reading otherwise you will be charged until the transfer is received and all bills including the final bill are paid and transfer approved by the Board of Directors.)*

**MAILING ADDRESS FOR FINAL BILL:**

Seller’s Forwarding address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Seller’s Phone number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ACCEPTANCE OF ASSIGNMENT**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, the assignee(s) named in the above assignment, hereby accept(s) the Assignment to (him, her, them) of the above described Benefit Unit No. \_\_\_\_\_, and agree(s) to assume and be bound by all of the obligations imposed on the holder of such Benefit Unit No\_\_\_\_\_ by the By-Laws and the Rules and Regulations of Rural Water District No. 5, Leavenworth County, Kansas.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of New Owner

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name of New Owner

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Signature of New Owner

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Printed Name of New Owner

Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Billing Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 City, State, Zip: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Bills are to be sent to the Benefit Unit Owner by MAIL\_\_\_\_\_\_ OR by EMAIL\_\_\_\_\_ (provide email address):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 **CONSENT TO ASSIGNMENT BENEFIT UNIT**

Pursuant to approval of the Board of Directors of Rural Water District No. 5,

Leavenworth County, Kansas, said Rural Water District hereby consents to and approves the transfer of the above mentioned Benefit Unit No. \_\_\_\_\_

from \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

to \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The District agrees to furnish water services to the assignee(s) upon the same terms and conditions that service was furnished to the assignors.

This Benefit Unit entitles the owner thereof not to exceed one water line from

The District’s water system and such line shall serve not to exceed one residence

or business establishment together with the necessary and usual out-buildings.

This Benefit Unit is subject to the provisions of the By-Laws and the Rules and

Regulations of said Rural Water District.

This Benefit Unit is assigned to the following described land in Leavenworth

County, Kansas, to wit:

 (See Exhibit A (Deed) attached hereto and made a part hereof as if more fully Set out therein)

In Witness Whereof, the said Rural Water District No. 5, Leavenworth County,

Kansas, has caused this Certificate to be signed by its duly authorized officers and its corporate seal affixed this \_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_.

 RURAL WATER DISTRICT NO. 5

SEAL LEAVENWORTH COUNTY, KS

 By:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Chairperson)

ATTEST:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 (Secretary)