NAME:	
ACCT. NO.	
MEMBERSHIP:	
MEMBERSHIP TRA	ANSFER AUTHORIZATION
Transferor hereby surrenders Membership in the LCWSC by execution of this form. Water service rights granted by membership and other qualification hereby cease contingent upon further qualification of the Transfere in accordance with the policies of the LCWSC. By execution hereof, the undersigned hereby acknowledges that the Membership Transfer complies with the terms of one of the following items:  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 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 the required Application and Service Agreement.  3. All indebtedness due the Corporation has been paid. In the event normal collection procedures do not clear transferor's obligation to the Corporation the transferee agrees to pay any debt left on this account.  4. The Transferee demonstrates satisfactory evidence of ownership of the property designated to receive service and from which the Membership originally arose.  5. Any other terms and conditions of the Corporation's Tariff are properly met.  6. In the event Transferor requests a membership transfer, the Corporation's current bylaws.	
Sign to Transfer Membership to LCWSC Refund (if any) after final bill	
Signature of Transferor Sign to Transfer Membership to TRANSFEREE (without compensation)	Signature of Transferee
FORWARDING ADDRESS:	Closing Date:
F	inal Reading:
REQUEST FOR SERVICE DISCONTINUANCE	
I hereby request that my account (#) be disconnected from LCWSC service and that my membership fee be refunded to me less any final charges due LCWSC. I understand that if I should ever want my service reinstated I may have to reapply for service as a new member and I may have to pay all costs as indicated in a then current copy of the LCWSC Tariff. Future ability to provide service will be dependent upon system capacity, which I understand may be limited and may require capital improvements to deliver adequate service. I also understand that these improvements will be at my cost. I further represent to the Corporation that my spouse joins me in this request and I am authorized to execute this Request for Service Discontinuance on behalf of my spouse.	

Signature