

**THE CONSOLIDATED WSC
REQUEST FOR SERVICE DISCONTINUANCE
& MEMBERSHIP CANCELLATION**

I / Business Name _____, hereby request that my water service for account number _____ located at _____, be disconnected from The Consolidated Water Supply Corporation service and that my membership fee be refunded. I understand that if I should ever want my service reinstated, I will have to reapply for service as a new member and pay all costs as indicated in the re-service provisions in the current copy of the Water Supply Corporation Tariff. Rights to future service at this tap shall be extended on an as-available basis and subject to the terms of the Activation of Service, Section E 1. of this Tariff. (Texas Water Code Section 67.016). Charges for water service will terminate when this signed statement is received by the Consolidated WSC office. I understand and agree that no fee will be incurred for the processing of this transaction, however any final water charges will be deducted from the membership fee.

Residential account:

If applicable, 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 as a joint owner of the aforementioned property.

Commercial account:

If applicable, I further represent to the Corporation that I am the duly authorized representative of _____ and have full authority to execute this Request for Service Discontinuance on behalf of said business.

Signature

Date of Signature _____

THE STATE OF TEXAS, COUNTY OF HOUSTON

IN WITNESS WHEREOF the said Transferor and the Corporation Representative have executed this instrument this _____ day of _____, 20____.

BEFORE ME, the undersigned, a Notary Public in and for said County and State of Texas, on this day personally appeared _____ and _____ known to me to be the persons whose names are subscribed to the foregoing instrument, and acknowledged to me that he/she/they executed the same for the purpose and consideration therein expressed.

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

Signature of Notary Public