## Who can use this form?

This form is intended for applicants seeking to **transfer** a water and or wastewater account with Santa Fe County Utilities (SFCU) at an existing service location.

Santa Fe County Utilities (SFCU) at an existing service location.					
	Service Information:				
Service Book #:	Service Account #:				
Service Address:					
	Owner's Information:				
and use this form to provide any update	g you are already listed on the account as owner), please check here es to your owner information.				
Property Owner Name(s):					
Owner's Billing Address (If different than Se	ervice Address):				
0.11.01					
Cell Phone:	Driver's License #:				
Home Phone:	Date of Birth:				
Work Phone:					
E-Mail:  Date Moved In/Closed:	Employer				
Date Moved III/Glosed.					
	Check One Below				
Receive e-bills instead of paper	bills (paperless) Receive e-bills in addition to paper bills				
	Receive paper bills only				
Owner's Agreement to Condition	s of Service:				
-					
	t I am responsible and obligated to pay any charges incurred				
	ove during the period that I own the real property at the er those charges are incurred with or without my authorization				
	pence of another person, and that this responsibility and				
obligation shall survive my alienation	on of the real property at the service address identified above				
	ation, transfer, gift, and foreclosure. As the property owner, I				
	the account for the convice address identified above is in the				
	the account for the service address identified above is in the see to comply with the Ordinances, Resolutions and Policies				
established by Santa Fe County as	a condition of service, and affirm under the penalties				
provided by law that the information	on this application is true and correct				

Signature of Owner: \_\_\_\_\_\_Date: \_\_\_\_\_

Service Information:						
Service Book #: Service Account #:						
Service Address:						
Property owner/agent for owner must fill out and sign front page.						
Tenant Information (if applicable):						
Tenant Name(s):						
Tenant's Billing Address (If diff	erent than Service <i>I</i>	Address):				
Cell Phone:		Driver's License	#:			
Home Phone:						
Work Phone:		•	Гах ID#:			
E-Mail:		Employer:				
Date Moved In:						
Check One Below  Receive e-bills instead of paper bills (paperless) Receive e-bills in addition to paper bills Receive paper bills only						
Tenant's Agreement to Conditions of Service (if applicable):						
Tenant's Agreement to	Conditions of S	Service (if appli	cable):			
Tenant's Agreement to  I/we acknowledge and ur incurred at the service ad rates, paying for services approval, and providing r I/we further agree to com Fe County as a condition information on this applic	derstand that I/Ndress identified until discontinuoutice at least fively with the Ordinof service, and	we are responsib above, including ed or transferred re (5) days prior t inances, Resolut affirm under the	le and obligated to paying for services to another person o the termination of ions and Policies e	s at the applicable with the County's f my/our account. stablished by Santa		
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Total Fees and Charges: