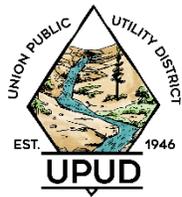


Recording Requested by UPUD

AND WHEN RECORDED MAIL TO:



339 MAIN STREET  
MURPHYS, CA 95247-9626  
PHONE (209) 728-3651

**NOTICE OF TERMINATION OF WATER SERVICE(S)**

I REQUEST TERMINATION OF WATER SERVICE TO THE FOLLOWING PROPERTY:

**Service Address:** \_\_\_\_\_

**Assessor's Parcel #** \_\_\_\_\_

**Map#** \_\_\_\_\_

**Meter #** \_\_\_\_\_

**Size:** \_\_\_\_\_

**# of EDU's Disconnected:** \_\_\_\_\_

Application for reinstatement of service(s) will require payment of all applicable fees and charges and costs associated with installation and reconnection, set by the UPUD Board of Directors at the time of reapplication, less any non-refundable parcel credit equal to the amount of the water connection charge in effect on the date the property was initially connected to Union Public Utility District.

I understand that by signing this Termination of Service Request that:

\_\_\_\_\_  
*Initial Here* I verify I am the legal-deeded owner of the above-identified property and it shall be the property owner's responsibility to make this information available to any new owner.

\_\_\_\_\_  
*Initial Here* I waive all obligations of Union Public Utility District to serve this property and understand the District will remove the facilities at its discretion.

\_\_\_\_\_  
*Initial Here* I further understand that at such time in the future, if I or a future property owner request or require water, an application for reinstatement of service will be required, payment of all unpaid, water connection charges, new meter cost and meter set or installation, and/or other applicable charges will be required, and water service will be available on a first-come, first-served basis to the extent the District has water capacity available for such service at that time.

\_\_\_\_\_  
**Initial  
Here**

I understand that the meter size and associated capacity and connection fees will be reevaluated at such time of reapplication for service.

\_\_\_\_\_  
**Initial  
Here**

The effective date of termination of my service will be the date the service is discontinued in the field by the District.

\_\_\_\_\_  
**Initial  
Here**

This process will discontinue the monthly charges to my property. I remain responsible for any amounts due, either billed or unbilled, up to the effective date of this discontinuance.

\_\_\_\_\_  
**Property owner name**

\_\_\_\_\_  
**Property owner signature**

\_\_\_\_\_  
**Date**

\_\_\_\_\_  
**(Signature(s) must be acknowledged by a notary public)**

Prepared by (print name): \_\_\_\_\_, UPUD

Date: \_\_\_\_\_

**CERTIFICATE OF ACKNOWLEDGMENT**

*A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.*

State of \_\_\_\_\_, County of \_\_\_\_\_

On \_\_\_\_\_ before me, \_\_\_\_\_, Notary Public, personally appeared

\_\_\_\_\_, who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

*I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.*

*WITNESS my hand and official seal.*

Signature \_\_\_\_\_

(SEAL)