

APPLICATION FOR MEMBERSHIP

TO: The Board of Directors
Upper Surface Creek Domestic Water Users Association
P.O. Box 70
Cedaredge, Colorado 81413-0070
(970) 856-7199

I (We) hereby make application for membership in Upper Surface Creek Domestic Water Users Association for the purpose of obtaining domestic water for my home located at:

and I hereby represent as follows:

(1) My home is, or will be, located approximately \_\_\_\_\_ feet from the present supply line of the Association and that I plan to connect to that supply line at or near:

(2) I agree to furnish and install at my own expense any and all pipe necessary to connect with the supply line in accordance with the policy of the Association; and that I agree to notify the Association at least 15 days in advance of planned installation in order for the Association to plan a work schedule and determine proper location of service line.

(3) I agree to pay an installation charge, in an amount established by the Board of Directors, payable upon my request for installation.

(4) I agree that water used from this membership will be used for one household only, and that if additional homes on my property and are to be served by this Association now or in the future, I agree that applications will be made for additional memberships.

(5) I agree to pay a minimum monthly assessment at a rate set by the Association whether or not water is installed or being used.

(6) That I hereby agree that any transfer of membership must have the approval of the Board of Directors and must comply with the By-Laws of the Association.

(7) For the purchase of one membership, I hereby tender the sum of \$10,000.00 (Ten-Thousand Dollars).

(8) That I hereby request the stock certificate to be issued to: (State exactly how stock ownership is to be listed)

(9) I agree to keep the Association informed of my current mailing address at all times, which now is:

Phone Number

Submitted this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Applicant's Signature:

This application is : Approved: \_\_\_\_\_

Disapproved: \_\_\_\_\_ (For the Following reason): \_\_\_\_\_

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

(Authorized Officer of the Association)

This is a Contract Please Read Before Signing

Faxed Applications will not be accepted