



Wagoner Rural Water District #2  
PO Box 1038  
Wagoner, OK 74477

Chairman: Janet Wright  
Manager: Mark Capps 918-691-3373  
Office: Jennifer Moore 918-485-9290  
Fax #: 888-372-1496

**Benefit Unit Certificate # \_\_\_\_\_ Transfer Of Ownership**

This certifies that \_\_\_\_\_ (is / are) the owner(s) of the above numbered Benefit Unit of Rural Water District #2, Wagoner County Oklahoma.

That consideration paid for this Benefit Unit is a donation to said Rural Water District and shall in no event and under no circumstances be refunded to the Certificate Holder.

This Benefit Unit cannot be transferred without the approval of the Board Of Directors of said Rural Water District.

This Benefit Unit entitles the owner to one water line connection from the District's water system and such connection may serve not to exceed one residence or business establishment, together with the usual and necessary outbuildings.

This Benefit Unit is subject to the provisions of the By-Laws and the Rules and Regulations of said Rural Water District, and is issued to owner(s) of property located in Wagoner County Oklahoma, the deed for same being recorded in the office of the County Clerk of Wagoner County in Book \_\_\_\_\_ Page \_\_\_\_\_.

In witness whereof, the said Rural Water District #2, Wagoner County, Oklahoma, has caused this certificate to be signed by its duly authorized officers and its corporate seal to be hereunto affixed this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

**By:** \_\_\_\_\_  
**Chairman** – Janet Wright

**Attest:** \_\_\_\_\_  
**Secretary** – Gary Phillips

**ASSIGNMENT:**

**DATE** \_\_\_\_\_

For value received, the undersigned owner(s) of the above numbered Benefit Unit of Rural Water District #2, Wagoner County, Oklahoma, hereby Assign(s), convey(s), and transfer(s) said Benefit Unit to:

\_\_\_\_\_  
**Printed Name of Person(s) Accepting Assignment – New Owner(s)**

\_\_\_\_\_  
**Physical Address Of Property**

\_\_\_\_\_  
**Previous Owner(s) – Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Signature**

**ACCEPTANCE OF ASSIGNMENT:**

**DATE** \_\_\_\_\_

The assignee(s) named above hereby accept(s) the assignment to him (her, them) of the above described Benefit Unit #  
The assignee(s) agrees to assume and be bound by all of the obligations imposed upon the holder of such Benefit Unit by the By-Laws and the Rules and Regulations of Rural Water District #2, Wagoner County Oklahoma. With this assumption of an existing Benefit Unit the new owner will include a required fee of \$100 plus the assumption of all previous and current due amounts that have been billed or are to be billed to this Benefit Unit #.

\_\_\_\_\_  
**New Owner(s) – Printed Name**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Signature**

\_\_\_\_\_  
**Billing Address**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip Code**

\_\_\_\_\_  
**Phone Number**