

PINEWOOD SANITARY DISTRICT
PO BOX 18758
MUNDS PARK AZ 86017
PHONE 928-286-9166 FAX 928-286-2465



Unit _____ Lot _____ Date _____

Existing Owners Name and Mailing Address:

Phone#

Effective Date of Transfer:

New Owners Name and Mailing Address:

Phone#

Email:

The signature of the new owner herein below authorizes the account transfer, and by same agrees to pay all applicable charges for sewer use for the subject property.

Date _____

Listing Realty _____ Date _____

Selling Realty _____ Date _____