

# River Road Utility District

---

## SERVICE TRANSFER REQUEST FORM

(From Deceased Relative to Living Relative)

I \_\_\_\_\_ as the living Relative of \_\_\_\_\_. I realize by adding my name to the account I will be held liable for any charges accrued while purchasing water from River Road Utility. I also understand I will be obligated to abide by the contract, rules & regulations set forth by River Road Utility of the existing customer contract. Signed by \_\_\_\_\_.

\*Name: \_\_\_\_\_ (new added customer)

\*SSN: \_\_\_\_-\_\_\_\_-\_\_\_\_\_

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

\*Home Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ \* Cell Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_ Work Phone: \_\_\_\_-\_\_\_\_-\_\_\_\_

\*Driver License Number: \_\_\_\_\_

\*Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**\*Copy of Driver's License, or ID along with Death Certificate, Will or Probate papers stating the property will be in your name.**

**\*\*OPTIONAL\*\***

- I would like the name on the existing account **REMOVED** \_\_\_\_\_  
(Existing Customer)

2201 River Road Ashland City TN 37015 Phone: 615-792-4603 Fax:(615)-792-3120  
Website: [www.rrudtn.com](http://www.rrudtn.com)