

Wallerville Water Association, Inc.

1534 CR 107

New Albany, MS 38652

RE: Relinquishment if Meter Deposit

I, _____, relinquish/give up/transfer my water deposit at the
property located at _____, account
(Address, City, State, Zip Code)
number _____, on this date of _____, 20____, to
_____.

I certify that I am the current property owner of this meter.

Printed Name: _____

Signature: _____

Date _____, 20____