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STATEMENT OF PROPERTY TRANSFER FORM

Please fill in as much information as you can, then submit this form to **West Sound Utility District**. If you have an existing account, you may go on-line to complete this statement of property transfer form.

DATE: _____

WSUD Acct. #: _____ WSUD Ref. #: _____

SERVICE ADDRESS: _____

TAX PARCEL #: _____

PLEASE PRINT

SELLER'S NAME: _____
SELLER'S FORWARDING ADDRESS: _____
CITY/STATE/ZIP: _____

BUYER'S NAME: _____
BUYER'S MAILING ADDRESS: _____
CITY/STATE/ZIP: _____
BUYER'S PHONE #: _____
(Please include area code)
DATE OF TRANSFER: _____
Email: _____

NAME OF PERSON MAKING THIS REQUEST: _____

West Sound Utility District recommends that you retain a copy of this completed form for your personal records.