

# NOTICE FOR TRANSFER OF SERVICE

## WATER SERVICE PROVIDER

(check which apply)

Launiupoko Irrigation Co., LLC  
33 Lono Avenue, Suite 450  
Kahului, HI 96732

Launiupoko Water Co., LLC  
33 Lono Avenue, Suite 450  
Kahului, HI 96732

\_\_\_\_\_  
Date

\_\_\_\_\_  
Current Account Owner

\_\_\_\_\_  
Water Service Address

\_\_\_\_\_  
Subdivision and Lot #

\_\_\_\_\_  
Estimated Closing Date

\_\_\_\_\_  
Escrow Office

\_\_\_\_\_  
Agent

NEW OWNER:

\_\_\_\_\_  
Name

\_\_\_\_\_  
Mailing Address

\_\_\_\_\_  
City, State, Zip

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

\_\_\_\_\_  
Cell Number

I am requesting a final reading on or about the estimated closing date and cancel my service as of the estimated closing date.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name