

# Grayson Utilities Commission

671 S State Highway 7  
Grayson, Kentucky 41143  
Phone: (606) 474-7569  
Fax: (606) 474-2662

## Transfer of Deposit Form

Date: \_\_\_\_\_

Customers Name: \_\_\_\_\_

Account Number: \_\_\_\_\_

Meter Serial Number: \_\_\_\_\_

I, the property owner/former property owner, am requesting that the deposit on file at the following address be transferred to:

\_\_\_\_\_  
(Transferee)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

It has been explained and I understand that the account will be transferred over to the person stated above.

**Transferor:** \_\_\_\_\_

Commonwealth of Kentucky

County of Carter

Subscribed, Sworn and Acknowledged to before me by \_\_\_\_\_, this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_ My Commission Expires \_\_\_\_\_

Notary Public, Kentucky  
State At Large

**Transfer of Deposit Form (Continued)**

**Transferee:** \_\_\_\_\_

Commonwealth of Kentucky

County of Carter

Subscribed, Sworn and Acknowledged to before me by \_\_\_\_\_, this \_\_\_\_\_ day of  
\_\_\_\_\_, 20\_\_\_\_

\_\_\_\_\_ My Commission Expires \_\_\_\_\_

Notary Public, Kentucky  
State At Large