



**FOUNTAIN HILLS
SANITARY DISTRICT**
Recycles Every Drop

16941 E. Pepperwood Circle
Fountain Hills, AZ 85268
Phone: (480) 837-9444
Fax (480) 837-0819

TITLE COMPANY NAME _____ FAX # _____ PHONE # _____

ESCROW # _____ CLOSE OF ESCROW _____ OCCUPANCY DATE _____

SELLER _____ MAILING ADDRESS _____

BUYER _____ MAILING ADDRESS _____

PLEASE BE SURE THE MAILING ADDRESS AND PHONE NUMBER FOR NEW BUYER IS ACCURATE!

BUYER'S PHONE NUMBER(S) _____

LEGAL DESCRIPTION: _____ PARCEL NO. _____

PROPERTY ADDRESS _____

PROPERTY IS: VACANT ___ IMPROVED ___ NEW CONSTRUCTION ___ SEWER CONNECTION PAID ___ DATE _____

ESCROW OFFICER (Please Print and Sign)

| | | |
|--------------------------|---|---|
| <input type="checkbox"/> | NOTICE OF EASEMENT: | If this box is checked, the property owner should be aware that an active easement may be present on the property. An active easement must remain clear for operation and maintenance purposes. Nothing may be constructed or planted within an active easement without permission from the District. |
| <input type="checkbox"/> | An abandonment or encroachment letter for this property is attached, please provide copy to new buyer. | |

AVAILABILITY FEES: (APPLIES TO VACANT LAND ONLY)

(A LATE CHARGE PLUS INTEREST IN THE AMOUNT OF 10% PER ANNUM IS ASSESSED ON ALL PAST DUE BALANCES)

AMOUNT OF THE AVAILABILITY FEE IS \$ _____ PAID ANNUALLY AND COVERS THE TIME PERIOD

FROM _____ TO _____. **PLEASE PRORATE**

- AVAILABILITY FEE HAS BEEN PAID
- AVAILABILITY FEE HAS NOT BEEN PAID (PLEASE COLLECT).
- AVAILABILITY FEE IS PAST DUE, PLEASE COLLECT A LATE FEE OF \$ _____.
- COLLECT BUYER ESTABLISHMENT FEE - PLEASE COLLECT \$ _____ FROM BUYER.

| |
|---|
| <p>TOTAL AMOUNT DUE TO THE DISTRICT: \$ _____ PLEASE COLLECT</p> |
|---|

SEWER USER FEES: (APPLIES TO IMPROVED PROPERTY)

(SEWER USER FEES ARE PAID QUARTERLY IN ADVANCE & ARE DUE IN JANUARY, APRIL, JULY, AND OCTOBER.)

(A LATE CHARGE PLUS INTEREST IN THE AMOUNT OF 10% PER ANNUM IS ASSESSED ON ALL PAST DUE BALANCES)

AMOUNT OF THE CURRENT SEWER USER FEE IS \$ _____ PAID QUARTERLY AND COVERS THE TIME PERIOD

FROM _____ TO _____. **PLEASE PRORATE**

- SEWER USER FEE HAS BEEN PAID.
- SEWER USER FEE HAS NOT BEEN PAID (PLEASE COLLECT).
- SEWER USER FEE IS PAST DUE, PLEASE COLLECT \$ _____ FOR THE TIME PERIOD OF _____ TO _____.
- COLLECT BUYER ESTABLISHMENT FEE - PLEASE COLLECT \$ _____ FROM BUYER.

IN ADDITION, PLEASE COLLECT \$ _____ FOR THE TIME PERIOD OF _____ TO _____.

Comments: _____

PAYMENTS ARE ACCEPTED FROM CUSTOMERS UNTIL PROOF OF CLOSING HAS BEEN RECEIVED.

PLEASE CALL TO UPDATE PRIOR TO CLOSING TO ELIMINATE DUPLICATE PAYMENTS! THANK YOU!

PLEASE FAX INQUIRY BACK AFTER CLOSE OF ESCROW OR INCLUDE COPY WITH PAYMENT.

Fountain Hills Sanitary District would like to acknowledge and thank you for the assistance you provide the District.
We appreciate all your help!

For Internal Use Only:

DATE: _____

UPDATED: _____

CLOSED: _____

CHECK #: _____

CSR: _____

Book/Account Number _____