



West Harris County Regional Water Authority (WHCRWA)

Application For Amended Permit (Transfer of Ownership)

Instructions:

Submit this form for each aggregate well system.

Items marked with an * are required.

*Well No: (Submit one form for each well.)

*Current Permittee:

*New Owner:

*Owner Email:

*Address:

*City:

*State: Select One

*Zip:

*Attn:

*Phone Number: (###-###-####) Ext.:

*Date of Ownership change: (mm/dd/yyyy)

I CERTIFY THAT THE FOREGOING STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY ABILITY.

*Applicant/Agent Name:

*Email Address:

*Confirm Email address:

Email completed form to cindy.gloyna@decorp.com