

Authorization for Transfer of Deposit

I, _____, **authorize the transfer of my deposit amount** on file for PSD#4 Account # _____, to _____, who will be the new account holder for the service.

Current Account Holder Information:

- **Name:** _____
- **Account Number:** _____
- **Service Address:** _____
- **Contact Number:** _____

New Account Holder Information:

- **Name:** _____
- **Service Address:** _____
- **Contact Number:** _____

Signature:

(Current Account Holder) (Date)

By signing I acknowledge I am signing the deposit amount on file for the account number, to above person and no longer have a claim to this deposit.

Please Mail to:

Preston County PSD#4
PO BOX 370,
BRUCETON MILLS, WV. 26525

Email to:

psd4@prodigiwv.net

