



CAMBRIA COMMUNITY SERVICES DISTRICT
P.O. Box 65, Cambria, CA 93428 · Phone (805) 927-6223

REQUEST FOR WITHDRAWAL OF WATER & SEWER "POSITION"

APN: - - WAITLIST POSITION: RESIDENTIAL COMMERCIAL

OWNER INFORMATION

NAME(s): _____
ADDRESS: _____
PHONE(s): _____
EMAIL(s): _____
OWNER'S AGENT (if applicable): _____

I/we wish to withdraw my/our position on the waitlist for water & wastewater allocation for the following reason(s):

I/we understand that this property shall be removed from the waiting list upon acceptance of this application, and that no reapplication is allowed under current District policies.

OWNERS' SIGNATURE(s): _____ DATE: _____

LEINHOLDER'S ACKNOWLEDGEMENT (attach additional sheets if necessary)

NAME: _____ NAME: _____
ADDRESS: _____ ADDRESS: _____
PHONE: _____ PHONE: _____
EMAIL: _____ EMAIL: _____

APPROVED BY DISTRICT SIGNATURE: _____ DATE: _____