

LAS POSAS VALLEY BASIN WATERMASTER

800 S. Victoria Avenue | Ventura, CA 93009-1610 (805) 654-2010 | LPV.Watermaster@venturacounty.gov



TRANSFER REQUEST FORM

Please note, Watermaster reserves the right to implement a schedule of fees sufficient to offset the expenses borne by Watermaster in processing requests for approvals as specified in the Judgment (Judgment, § 7.4).

TYPE OF TRANSFER

Lease

Permanent Transfer

Transfer of Carryover

| LEASES | |
|---|--|
| Lessor Information: | Lessee Information: |
| Lessor WMID: | Lessee WMID: Requesting New WMID |
| Name of Lessor: | Name of Lessee: |
| Lessor Address: | Lessee Address: |
| City, State, Zip: | City, State, Zip: |
| Phone number: | Phone number: |
| Lessor Email: | Lessee Email: |
| Lessor APN(s) [APN(s) within WMID] | Lessee APN(s) [APN(s) within WMID or to be included within new WMID] |
| Lessor Point of Extraction | Lessee Point of Extraction |
| Private Well(s) | Private Well(s) |
| Identify State Well Number(s) | Identify State Well Number(s) |
| Mutual Water Company | Mutual Water Company |
| Amount of Allocation Basis Leased: | AFY |
| Type of Allocation Leased: | Base Agricultural Supplemental Agricultural Commercial WWD |
| Term of Lease: | Years |
| Commencing (Date): | Ending (Date): |
| <i>We acknowledge that Watermaster's approval, and our acceptance of any restrictions or conditions of approval imposed by Watermaster, are conditions precedent to the effectiveness of the lease.</i> | |
| Lessor's initials: | Lessee's initials: |
| <i>If approved, during the term of the Lease, I acknowledge that I will remain responsible for all payments of Basin Assessments and Overuse Penalty Assessments.</i> | |
| Lessor's initials: | |

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| PERMANENT TRANSFERS (Allocation Basis or Carryover) | | | | | | | | |
|--|---------------------------|--|-----|--|-------------------|---------------------------|------------|-----|
| Seller Information | | Buyer Information | | | | | | |
| Seller WMID: Name of Seller: Seller Address: City, State, Zip: Phone number: Seller Email: | | Buyer WMID: Requesting New WMID Name of Buyer: Buyer Address: City, State, Zip: Phone number: Buyer Email: | | | | | | |
| Seller APN(s) [APN(s) within WMID] | | Buyer APN(s) [APN(s) within WMID or to be included within new WMID] | | | | | | |
| Seller Point of Extraction | | Buyer Point of Extraction | | | | | | |
| Private Well(s) Identify State Well Number(s) Mutual Water Company | | Private Well(s) Identify State Well Number(s) Mutual Water Company | | | | | | |
| Seller Allocation Basis BEFORE Transfer: AFY | | Buyer Allocation Basis BEFORE Transfer: AFY | | | | | | |
| Allocation Basis to be Sold: AFY | | Entity type: | | | | | | |
| Amount of Carryover to be Sold: AFY | | | | | | | | |
| Type of Allocation Transferred: <table border="0" style="width:100%"> <tr> <td>Base Agricultural</td> <td>Supplemental Agricultural</td> <td>Commercial</td> <td>WWD</td> </tr> </table> | | | | | Base Agricultural | Supplemental Agricultural | Commercial | WWD |
| Base Agricultural | Supplemental Agricultural | Commercial | WWD | | | | | |
| Quantity of Allocation Transferred by Type (AF): <table border="0" style="width:100%"> <tr> <td>Base Agricultural</td> <td>Supplemental Agricultural</td> <td>Commercial</td> <td>WWD</td> </tr> </table> | | | | | Base Agricultural | Supplemental Agricultural | Commercial | WWD |
| Base Agricultural | Supplemental Agricultural | Commercial | WWD | | | | | |
| Sale in connection with Conveyance of (Portion of a Parcel)? <table border="0" style="width:100%"> <tr> <td>Yes</td> <td>No</td> </tr> </table> If yes, identify the APN(s) of Parcel(s) being conveyed | | | | | Yes | No | | |
| Yes | No | | | | | | | |
| <i>We acknowledge that Watermaster's approval, and our acceptance of any restrictions or conditions of approval imposed by Watermaster, are conditions precedent to the effectiveness of the Transfer.</i> | | | | | | | | |
| Seller's Initials | | Buyer's initials: | | | | | | |
| A copy of the deed is enclosed (if Permanent Transfer is in the connection with Sale of a [Portion of a] Parcel). | | | | | | | | |
| A copy of the Seller's Water Rights Grant Deed is enclosed. | | | | | | | | |
| A copy of the Buyer's Water Rights Grant Deed is enclosed. | | | | | | | | |

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MAPS: Please include a map of the area where the water was used by the Transferor and a map of the area where the water is intended to be used by the Transferee. Include locations of production facilities involved in or affected by the Transfer.

SIGNATURES

I understand and agree to abide by the terms of the Las Posas Valley Basin Adjudication Judgment. I swear under penalty of perjury that the information provided on this Transfer Request Form is correct to the best of my knowledge, that I am authorized to enter into this Transfer on behalf of the party indicated below and to bind that party on whose behalf I am signing, that signing this Transfer Request Form is within the scope of my authority, and that the signature below, whether original, electronic, or photocopied, is authorized and valid, and is affixed with the intent to be enforceable. I understand that it is my responsibility to notify Watermaster of any changes in any of the information provided on this form as soon as practicable. I also understand that additional information may be required if there is a suspected potential for an Undesirable Result as defined in the Judgment.

A Transfer shall not become effective until and unless all Parties to the Transfer are in Good Standing and the Parties have complied with all applicable provisions of section 4.12 of the Las Posas Valley Basin Adjudication Judgment. This includes determining that the transfer will not cause Material Injury or Undesirable Results.

I have reviewed Section 4.12 of The Jugement

Transfer will not cause Material Injury

Transfer will not cause Undesirable Result

Transferor: _____

Signature: _____

Date: _____

Title: _____

Transferee: _____

Signature: _____

Date: _____

Title: _____

To be completed by Watermaster:

Watermaster Approval: _____ Date: _____

Fees Required: _____