

Osage Municipal Utilities Voluntary Community Solar Program

Account Transfer/Assignment/Termination

Effective Date of Change: _____

Change of Assignment

	Assignor	Assignee
Customer Name:	_____	_____
Customer Account No.:	_____	_____
Service Address:	_____	_____
Mailing Address:	_____	_____
City, State, Zip Code:	_____	_____
Units Purchased:	_____	_____

Change of Address and Account

	Original Address & Account	New Address & Account
Customer Name:	_____	_____
Customer Account No.:	_____	_____
Service Address:	_____	_____
Units Purchased:	_____	_____

Termination

Schedule of Repurchase Values

Customer Name:	_____		Percent of
Customer Account No.:	_____		Subscription
Service Address:	_____	Year	Fee
Mailing Address:	_____	1	90
City, State, Zip Code:	_____	2	80
		3	70
		4	60
		5	50
Units Purchased:	_____	6	40
Percent of Subscription Fee:	_____ X	7	30
Repurchase Value:	\$ _____ - =	8	20
		9	10
		10-12	5
		13-20	0

IN WITNESS WHEREOF, the parties have executed this Agreement as of the date first written above.

Assignor
Signature: _____ Date: _____

I _____ (assignee) agree to be bound by the terms of the original Agreement.

Assignee
Signature: _____ Date: _____