



E. M. W. GAS ASSOCIATION
PO BOX 118
ESTANCIA, NEW MEXICO 87016
(505) 384-2369 FAX (505) 384-2234

RELEASE OR TRANSFER OF METER DEPOSIT

I the undersigned have paid the required Meter Deposit on Account #_____ and **WILL NOT ALLOW** EMW Gas Association to transfer this Meter Deposit to another name or account and **WILL NOT RELINQUISH** the right to receive a refund of this deposit. I understand the final bill will be applied against this deposit and I will receive a refund only if monies remain after the final bill has been paid.

NAME: _____ DATE: _____

NAME: _____ DATE: _____

WITNESS: _____ DATE: _____