

**CENTRAL ARIZONA WATER CONSERVATION DISTRICT
CENTRAL ARIZONA GROUNDWATER REPLENISHMENT DISTRICT
P.O. Box 43020
PHOENIX, ARIZONA 85080-3020**

**TERMINATION OF MEMBER SERVICE AREA STATUS APPLICATION
FROM THE
CENTRAL ARIZONA GROUNDWATER REPLENISHMENT DISTRICT (CAGRDR)
Revised 3/1/2022**

PART I – INSTRUCTIONS

- Step 1.** Please answer all questions in Part II of this application.
- Step 2.** Please gather the required documents listed in Part III of this application.
- Step 3.** File the completed application, together with the required documents with the Central Arizona Groundwater Replenishment District, P.O. Box 43020, Phoenix, Arizona 85080-3020. **A de-enrollment fee of \$5,000.00 must accompany this application. Please make checks payable to CAGRDR.**
- Step 4.** Upon receipt of a complete and correct application, CAGRDR will prepare a Revocation of Member Service Area Agreement for execution by the Municipal Provider and CAWCD.
- Step 5.** CAGRDR will forward the Revocation of Member Service Area Agreement to the Municipal Provider for execution.
- Step 6.** The Municipal Provider shall prepare and execute, or cause to be executed on its behalf, the Resolution declaring its intent to terminate and shall publish the Resolution once each week for two consecutive weeks in a newspaper of general circulation in the county or counties where the Municipal Provider's Service Area is located, in accordance with Arizona Revised Statutes § 48-3780(7).
- Step 7.** The Municipal Provider shall return the fully executed Resolution and Revocation of Member Service Area Agreement to CAGRDR, together with an affidavit of publication from the newspaper(s) which published the Resolution, to CAGRDR.
- Step 8.** CAWCD will execute the Revocation of Member Service Area Agreement. CAGRDR will then notify the Arizona Department of Water Resources that the Municipal Provider has terminated its Member Service Area of the Central Arizona Groundwater Replenishment District

PART II – GENERAL INFORMATION

1. Water Provider:

- a. Name: _____
- b. Address: _____
- c. Telephone: _____

2. Owner:

- a. Owner name (if applicable): _____
- b. If the owner of the Water Provider is other than an individual, such as a corporation, limited liability company, partnership or trust, name the type of Legal entity: _____
- c. Name of Authorized Signer: _____
- d. Title of Authorized Signer: _____

3. Primary contact party:

- a. Name: _____
- b. Address: _____
- c. Telephone: _____

4. Has an application been submitted to the Director of Water Resources requesting modification of the municipal provider's assured water supply designation under § 45-576 that eliminates the municipal provider's reliance on member service area status? _____

5. Has the Director of Water Resources approved the Municipal Provider's application to modify its assured water supply designation based on the addition of the substitute water supply? _____

6. Has the Arizona Department of Water Resources consented to the termination of the Service Area's Member Service Area status? _____

7. Does the Municipal Provider agree to revoke the Member Service Area Agreement, no longer obligating the CAGR to perform the groundwater replenishment obligations on behalf of the service area? _____

PART III - DOCUMENTS REQUIRED FOR PROCESSING

1. A completed copy of the Member Service Area De-Enrollment Application from the Central Arizona Groundwater Replenishment District.
2. An electronic map of the Municipal Provider's service area.
3. Termination letter of consent from the Department of Water Resources.
4. A copy of the Decision And Order from the Department of Water Resources.