

Forward this completed application form to: ULRW@utsystem.edu.

ASSIGNMENT FOR EASEMENT AND COMMERCIAL (SURFACE) CONTRACT

CONTRACT NUMBER(S) OF EASEMENT OR SURFACE LEASE TO ASSIGN:

NAME OF ASSIGNOR: _____

ADDRESS: _____

CITY, STATE & ZIP: _____

CONTACT PERSON: _____

E-MAIL: _____

TELEPHONE #: _____

NAME OF ASSIGNEE: _____

ADDRESS: _____

CITY, STATE & ZIP: _____

CONTACT PERSON: _____

E-MAIL: _____

TELEPHONE #: _____

EFFECTIVE DATE OF ASSIGNMENT: _____

*****PROVIDE COPY OF ASSIGNMENT OR LETTER FROM ASSIGNOR*****