COMAL COUNTY WATER RECREATIONAL DISTRICT NO. 1

P.O. Box 310009 New Braunfels, TX 78131-0009 ccwrd1@gmail.com



PROPERTY OWNER'S AUTHORIZED USER ELIGIBILITY

District Recreational Privileges are extended to the immediate family of the single family Property Owner, defined as children, grandchildren and great-grandchildren and their spouses. The aforementioned relationships to the Property Owner are the **ONLY** persons who can become Authorized Users.

Only one family per legally platted property will be granted Water Recreational District Privileges.

ANY form of **multiple party ownership** of a legally platted property **does not** grant Water Recreational District Privileges to all owners.

C.C.W.R.D No.1 utilizes the Comal Appraisal District records (<u>comalad.org</u>) to determine the legal description and ownership of property within the District.

In order to utilize the District Recreational Privileges of the property, the Property Owner must properly register all authorized users with C.C.W.R.D. No.1 via submission of this Affidavit Form.

AFFIDAVIT OF PROPERTY OWNER'S AUTHORIZED USER ELEGIBILITY

COUNTY OF COMAL

(PLEASE ENTER_OWNERSHIP INFORMATION EXACTLY AS SHOWN IN COMAL APPRAISAL DISTRICT RECORDS (comalad.org))

PROPERTY OWNER'S NAME

MAILING ADDRESS

CITY, STATE, ZIP CODE

All parties to this Affidavit have personal knowledge of facts set forth in this Affidavit, which are true and correct, and are fully competent to make statements set forth below: As the Property Owner, I understand and acknowledge that the <u>only</u> persons that may be listed as, or become Authorized Users of the District Recreational Privileges for the property listed below are *myself*, *my spouse*, *my children and grandchildren*, *great-grandchildren*, and their spouses.

I further understand and acknowledge that District Recreational Privileges <u>cannot</u> be extended to grandparents, parents, uncles, aunts, nieces, nephews, cousins, brothers, sisters, friends, or ex-spouses of the Property Owner.

I understand that the Board of Directors of C.C.W.R.D. No.1 reserves the right to require an original copy of a birth certificate and/or a State issued I.D. of any person listed as an authorized user for the purposes of eligibility verification.

I understand and acknowledge that knowingly and/or intentionally providing false or misleading information to C.C.W.R.D. No. 1 in this affidavit, or in any other form, for the purpose of allowing an ineligible person to become an Authorized User of C.C.W.R.D. No. 1 property will result in a minimum of 60 day suspension of District Recreational Privileges for the Property Owner and all Authorized Users.

I understand the suspension will include the Property Owner(s), children, grandchildren and great- grandchildren, and their spouses. The suspension will exclude access by any and all means, including access as a guest of another Property Owner or renter, or by criminal trespass, to all C.C.W.R.D. No. 1 owned property for the designated period. The suspension will be for a continuous 60 day period to be determined by and at the sole discretion of the Board of Directors.

I understand the Board of Directors will provide the Property Owner notification of suspension of District Recreational Privileges and the effective dates of suspension, via registered mail, to the address shown in the Comal Appraisal District records.

As the Property Owner, if I wish to make any changes to the Authorized User list subsequent to filing of this Affidavit Form with the District, I must submit a new Affidavit Form, which must include proof of eligible relationship to the Property Owner for any additional Authorized Users.

PLEASE COMPLETE THE FORM BY TYPING YOUR PROPERTY'S LEGAL ADDRESS AS SHOWN IN COMAL APPRAISAL DISTRICT RECORDS (comalad.org), AND YOUR AUTHORIZED USER INFORMATION INTO THE APPROPRIATE BOXES

All information gathered, collected or otherwise obtained in this document is for the sole, exclusive and private use of C.C.W.R.D. No. 1 to determine property owner authorized user's eligibility. This information will not to be distributed or otherwise disseminated in any fashion, except as required by law.

PROPERTY OWNER INFORMATION AFFIDAVIT PROPERTY DESCRIPTION WITHIN C.C.W.R.D. NO.1 STREET **NUMBER** LOT # (S) **BLOCK** # \rightarrow **AUTHORIZED USER LIST RELATIONSHIP TO DATE OF BIRTH LAST NAME FIRST NAME PROPERTY OWNER** (MO /DAY / YEAR) **OWNER NOT REQUIRED OWNER'S SPOUSE NOT REQUIRED** 2 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24

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I personally attest and declare under penalty of perjury that <u>the information provided in</u> <u>this affidavit, by the undersigned, is true and correct to the best of my knowledge and belief.</u>

This instrument was executed on this	day of
BY:	MONTH YEAR
PROPERTY OWNER- ACCORDING TO COMAL APP	AISAL DISTRICT
PROPERTY OWNER- ACCORDING TO COMAL APP	AISAL DISTRICT
PROPERTY OWNER CONTACT INFORMA	TION FOR C.C.W.R.D. No. 1 CORRESPONDENCE
MAILING ADDRESS	ADDRESS
	CITY STATE
	TELEPHONE NUMBER
Windows us	ers click on the submit button.
	nust submit by following the in the Mac users instruction download.

Thank you