## Fax#910-814-4002 or upload to www.sendthisfile.com/harnett, recipient utilitybilling@harnett.org

## HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES

## **Equal Opportunity Provider and Employer**

Water User's Agreement

Form Must be Completed in Full Before Service is Made Available. I.D. is Required.

\*\*\*DEPOSITS BELOW APPLY TO APPROVED CREDIT ONLY\*\*\*

Today's Date Contract Date			Deposit, Owne Deposit, Owne	er, Sewer	\$25 \$25	Set Up Fee, all accounts: \$15	
Date Service Requested Will Call			Deposit, Renta Deposit, Renta		\$50 \$50	Meter Fee: \$70	
This agreement is to request the Harnett O the District's Rules and Regulations, to p	County Department of Pul rovide water and /or sewe	olic Utilities r service co	through normal nnections at the	procedure following	s and in a location:	accordance with	
Service Address OY6 New aste Cane			Lot 204 Highgrove @ ACC				
Owner_XRenter(PROPERTY OWNER & PHONE NO.) _			H&H Constructors of Fayetteville, LLC.				
			910-486-4864				
APPLICANT			CO-APPLICANT				
NAME (FIRST, LAST)			NAME (FIRST, LAST)				
H&H Constructors of Fayetteville, LLC.				11		8	
MAILING ADDRESS: 2919 Breezewood Ave. Ste.	400 Fayetteville, NC 2	28303	e o	*	**	***	
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN		CONTA	ACT PHONE #		
56-1782112	910-486-4864	8					
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S	LICENSE # AND	STATE	DATE	OF BIRTH	
EMPLOYER NAME		EMPLOYER NAME					
EMPLOYER ADDRESS	PHONE #	EMPLOYE	ER ADDRESS		PHÓ	ONE#	
PREVIOUS ADDRESS			PREVIOUS ADDRESS				
NAME OF NEAREST RELATIVE AND PHONE #			NAME OF NEAREST RELATIVE AND PHONE #				
I, the undersigned, do agree to abide by make all payments on time when due as structure notice. In order for service to be refrom court action to collect on an accour \$1.00 will not be refunded. Property obeing used, until the property is sold of LOSS. Please ensure residence or facil requesting water service.  By signing this application, you are agree Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$	ated on the WATER/SEV estored, I will be required at will be the responsibilitation where will be responsible rented. HARNETT (ity is prepared for water that you are at least 1	VER bill, the to pay ALL ty of the cu le for a mo COUNTY Is connection 8 years of ag	e department has DUE amounts p stomer. FINAL nthly bill regards NOT RESPO 1. Make sure all ge.	the right t lus a \$40 r BILLS w dless of v NSIBLE	to disconnect of the connect of the cree o	nect my service withou fee. Any fees resulting dit balance of less than water and/or sewer is ATER DAMAGE OF are turned off before	
ACCOUNT #: CID:	LID:			CRED	IT: APP	PROVED / DENIED	
Turn On: Unlock Only:		stall:	Customer				