

**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 _____	Fees Due: Deposit, Owner, Water	\$25	Set Up Fee,	
		Deposit, Owner, Sewer	\$25	all accounts:	\$15
		Deposit, Rental, Water	\$50		
Date Service Requested _____		Deposit, Rental, Sewer	\$50	Meter Fee:	\$70

This agreement is to request the Harnett County Department of Public Utilities through normal procedures and in accordance with the District's Rules and Regulations, to provide water and /or sewer service connections at the following location:

Service Address: 1380 Crawford Road, Coats, NC 27521

Owner  Renter \_\_\_\_\_ (PROPERTY OWNER & PHONE NO.) George Gregory Frank 910-987-6466

APPLICANT		CO-APPLICANT	
NAME (FIRST, LAST) <u>George Frank</u>		NAME (FIRST, LAST)	
MAILING ADDRESS: <u>578 Broyhill Road Fayetteville NC 28314</u>			
SOCIAL SECURITY # OR TIN <u>592-24-4838</u>	CONTACT PHONE # <u>910-987-6466</u>	SOCIAL SECURITY # OR TIN .	CONTACT PHONE #
DRIVER'S LICENSE # AND STATE <u>NC 23349540</u>	DATE OF BIRTH <u>10/20/1983</u>	DRIVER'S LICENSE # AND STATE	DATE OF BIRTH
EMPLOYER NAME <u>County of Harnett</u>		EMPLOYER NAME	
EMPLOYER ADDRESS <u>1005 Edwards Bros. Dr. Lillington</u>	PHONE # <u>910-893-0712</u>	EMPLOYER ADDRESS	PHONE #
PREVIOUS ADDRESS <u>578 Broyhill Rd Fayetteville NC 28314</u>		PREVIOUS ADDRESS	
NAME OF NEAREST RELATIVE AND PHONE # <u>George Frank 578 Broyhill Rd Fayetteville NC 28314</u>		NAME OF NEAREST RELATIVE AND PHONE #	

I, the undersigned, do agree to abide by the rules and regulations of the Harnett county Department of Public Utilities. Should I fail to make all payments on time when due as stated on the WATER/SEWER bill, the department has the right to disconnect my service without further notice. In order for service to be restored, I will be required to pay ALL DUE amounts plus a \$40 reconnect fee. Any fees resulting from court action to collect on an account will be the responsibility of the customer. FINAL BILLS with a credit balance of less than \$1.00 will not be refunded. **Property owners will be responsible for a monthly bill regardless of whether water and/or sewer is being used, until the property is sold or rented. HARNETT COUNTY IS NOT RESPONSIBLE FOR WATER DAMAGE OR LOSS.** Please ensure residence or facility is prepared for water connection. Make sure all valves & faucets are turned off before requesting water service.

By signing this application, you are agreeing that you are at least 18 years of age.

**Customer Signature** \_\_\_\_\_

FOR OFFICE USE ONLY

FEES: Set-Up Fee \$15 Deposit \$ \_\_\_\_\_ Same Day \$45 Meter Fee \$70 Damage \$ \_\_\_\_\_ Other \$ \_\_\_\_\_

Account # Transferred From: \_\_\_\_\_ Date To Turn Off \_\_\_\_\_

ACCOUNT #: CID: \_\_\_\_\_ LID: \_\_\_\_\_ WATER \_\_\_\_\_ SEWER \_\_\_\_\_ CREDIT: APPROVED / DENIED

Turn On: \_\_\_\_\_ Unlock Only: \_\_\_\_\_ Read Only: \_\_\_\_\_ Install: \_\_\_\_\_ Customer Serv Rep: \_\_\_\_\_