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 6 16 2 PCo	ntract Date	Fees Due: Deposit,	Owner, Water	\$25 Set Up Fee,
Date Service Requested		Deposit,	Owner, Sewer Rental, Water	\$25 all accounts: \$15
				\$50 \$50 Meter Fee: \$70
This agreement is to request the Harne the District's Rules and Regulations, to	ett County Department of P	ublic Utilities through n	ormal procedure	s and in accordance with
Owner X Renter (PROPE	ERTY OWNER & PHONE NO.)	Miguay	Varina	NC 27524
(TROFF	EKT F OWNER & PHONE NO.)			
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)				
	HN: Maria Brown	NAME (FIRST, LAST)		
WALLING ADDRESS.				
1450 Lake Robbins L	Dr. Ste. 430	The Hardle	1 -11 -	
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	The Woodland	OR TIN	
led 10# 463088013	919-195-3922			CONTACT PHONE #
DRIVER'S LIGENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # A	ND STATE	DATE OF BIRTH
EMPLOYER NAME				
		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #			
Se and the second secon	PRONE #	EMPLOYER ADDRESS		PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
NAME OF NEAREST RELATIVE AND PHONE #		NAME OF NEAREST RELATIVE AND PHONE #		
	¥ 34			
I, the undersigned, do agree to abide by the make all payments on time when due as state further notice. In order for service to be restrom court action to collect on an account \$1.00 will not be refunded. Property ow being used, until the property is sold or LOSS. Please ensure residence or facility requesting water service.  By signing this application, you are agree in Customer Signature	stored, I will be required to will be, the responsibility mers will be responsible rented. HARNETT CO y is prepared for water cong that you are at least 18 y	pay ALL DUE amounts of the customer. FINA for a monthly bill regularity of the customer. FINA for a monthly bill regularity is NOT RESF connection. Make sure years of age.	s plus a \$40 records a \$40 records a \$40 records with gardless of where PONSIBLE FOR all valves & far	isconnect my service without nnect fee. Any fees resulting a credit balance of less than ther water and/or sewer is R WATER DAMAGE OR icets are turned off before
FEES: Set-Up Fee \$15Deposit \$	Same Day \$45	Meter Fee \$70_	_Damage \$	Other \$
Account # Transferred From;		Date To Turn Off_		
ACCOUNT #: CID: 232561 I	LD: 016163 W	VATER SEWER	CREDIT	APPROVED (PERSON
Turn On:Unlock Only:	Read Only:Instal	l: Custome	er Serv Rep:	- DEMED

Harnett Regional Water 700 McKinney Parkway Lillington, NC 27546 Telephone: 910-893-7575

harnettwater.org

User: CPCIS	2		POS	
Date: 6/23/2020 307			Receipt: 2916	
Customer 232561	Account 096163	Name LGI HOMES		
59 DOON	BEG DR			
Misc Fees	/POS/Sy	s Dev		
1	3/4" MANUAL METER		70.00	
1	SETUP FEE		15.00	
Amount Due			\$85.00	
CHECK #SEDIV-00006414			\$(85.00)	
			\$(85.00)	
BALANCE REMAINING			\$0.00	
CHANGE			\$0.00	

Trans Date: Jun 23, 2020 Time: 10:54:55AM

\*\*\* Thank You For Your Payment \*\*\*