

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

User: CPCIS2 POS  
Date: 4/28/2021 5730 Receipt: 49308

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Customer	Account	Name
215411	211356	GLENWOOD BUILDERS LLC
45 WADE STEPHENSON RD		

Misc Fees/POS/Sys Dev		
1	3/4" MANUAL METER	70.00
1	SETUP FEE	15.00

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Amount Due	\$85.00
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MASTERCARD	\$(85.00)
CONFIRMATION #7673	
Total Payment:	\$(85.00)

BALANCE REMAINING	\$0.00
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CHANGE	\$0.00
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Trans Date: Apr 28, 2021 Time: 4:05:54PM

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

Fax#910-814-4002 or upload to [www.sendthisfile.com/harnett](http://www.sendthisfile.com/harnett), recipient [utilitybilling@harnett.org](mailto: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\*\*\***

Today's Date <u>4/28/21</u>	Contract Date _____	Fees Due: Deposit, Owner, Water	\$25	Set Up Fee,	
Date Service Requested <u>ASAP</u>		Deposit, Owner, Sewer	\$25	all accounts:	\$15
		Deposit, Rental, Water	\$50		
		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: 45 Wade Stephenson Rd Fuquay Varina NC 27526

Owner  Renter \_\_\_\_\_ (PROPERTY OWNER & PHONE NO.)

APPLICANT		CO-APPLICANT	
NAME (FIRST, LAST) <u>Glenwood Builders</u>		NAME (FIRST, LAST)	
MAILING ADDRESS: <u>1757 Oakridge Duncan Rd Fuquay Varina NC 27526</u>			
SOCIAL SECURITY # OR TIN <u>81-3745896</u>	CONTACT PHONE # <u>919-868-4202</u>	SOCIAL SECURITY # OR TIN	CONTACT PHONE #
DRIVER'S LICENSE # AND STATE <u>23218309</u>	DATE OF BIRTH <u>4/17/81</u>	DRIVER'S LICENSE # AND STATE	DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME	
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRESS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS	
NAME OF NEAREST RELATIVE AND PHONE #		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** [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: 215411 LID: 211356 WATER \_\_\_\_\_ SEWER \_\_\_\_\_ CREDIT: APPROVED / DENIED  
 Turn On: \_\_\_\_\_ Unlock Only: \_\_\_\_\_ Read Only: \_\_\_\_\_ Install: \_\_\_\_\_ Customer Serv Rep: \_\_\_\_\_