## **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\*\*\*

<del></del>	ntract Date	Deposit, Rental, V	Sewer \$25 all accounts: \$15 Water \$50	
Date Service Requested_asap		Deposit, Rental, S		
This agreement is to request the Harne the District's Rules and Regulations, t	to provide water and /or			
Service Address: TBD Mitchell N	Manor Drive			
Owner XX Renter (PROP	PERTY OWNER & PHONE I	NO.) <u>Weaver Homes Inc 9</u>	10-630-2100 ext 204	
APPLICANT		CO-AP	CO-APPLICANT	
NAME (FIRST, LAST)		NAME (FIRST, LAST)	NAME (FIRST, LAST)	
Weaver Homes, Inc				
MAILING ADDRESS:		-		
350 Wagoner Drive Fayette	ville NC 28303			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN	CONTACT PHONE #	
61-1763089	910-630-2100			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STA	TE DATE OF BIRTH	
EMPLOYER NAME		EMPLOYER NAME	EMPLOYER NAME	
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRESS	PHONE #	
PREVIOUS ADDRESS		PREVIOUS ADDRESS	PREVIOUS ADDRESS	
NAME OF NEAREST RELATIVE AND PHONE #		NAME OF NEAREST RELATIVE	NAME OF NEAREST RELATIVE AND PHONE #	
I, the undersigned, do agree to abide make all payments on time when due a further notice. In order for service to be from court action to collect on an acc \$1.00 will not be refunded. Propert being used, until the property is sol LOSS. Please ensure residence or farequesting water service.	as stated on the WATER of restored, I will be requeount will be the responsy owners will be respond or rented. HARNE acility is prepared for	L/SEWER bill, the department has the uired to pay ALL DUE amounts plus assibility of the customer. FINAL BI onsible for a monthly bill regardle CTT COUNTY IS NOT RESPONS water connection. Make sure all variance.	e right to disconnect my service without a \$40 reconnect fee. Any fees resulting LLS with a credit balance of less that ass of whether water and/or sewer at IBLE FOR WATER DAMAGE O	
By signing this application, you are ag	greeing that you are at le	east 18 years of age.		
Customer Signature	Jammy Jre	· / ·		
FEES: Set-Up Fee \$15Deposit S	\$Same	Day \$45Meter Fee \$70Dar	mage \$Other \$	
Account # Transferred From:		Date To Turn Off		
ACCOUNT #: CID:	LID:	WATERSEWER	CREDIT: APPROVED / DENIED	
Turn On: Unlock Only:	Read Only:	Install: Customer Se	erv Rep:	