HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES

Water User's Agreement

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

		PROVED CREDIT ONLY***	
Today's Date 08/12/2021 Con	Fees Duentract Date	e: Deposit, Owner, Water \$25	
Today s Date Cor	itract Date	Deposit, Owner, Sewer \$25 Deposit, Rental, Water \$50	
Date Service Requested		Deposit, Rental, Sewer \$50	
his agreement is to request the Harnet be District's Rules and Regulations, to	provide water and /or sewer	r service connections at the followin	res and in accordance with g location:
ervice Address: 142 Indigo S	Street, Lillington N	NC 27546	
wner_ ✓ Renter (PROPE			c. 919-938-8194
APPLICANT NAME (FIRST, LAST) Watermark Homes, Inc.		CO-APPLICANT NAME (FIRST, LAST)	
SOCIAL SECURITY # OR TIN 56-2232164	CONTACT PHONE # 919-938-8194	SOCIAL SECURITY # OR TIN	CONTACT PHONE #
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	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 #	
the undersigned, do agree to abide be take all payments on time when due ithout further notice. In order for series resulting from court action to collect less than \$1.00 will not be refunded. Ever is being used, until the proparation of before requesting water say signing this application, you are agreed.	as stated on the WATER/ rvice to be restored, I will be ect on an account will be the Property owners will be perty is sold or rented. e residence or facility is prervice.	SEWER bill, the department has the required to pay ALL DUE amount of responsibility of the customer. FI responsible for a monthly bill regHARNETT COUNTY IS NOT repared for water connection. Management	he right to disconnect my servints plus a \$30 reconnect fee. A NAL BILLS with a credit bala ardless of whether water and RESPONSIBLE FOR WAT
Customer Signature	7		
EES: Set-Up Fee \$15Deposit \$_	Same Day \$-	FOR OFFICE USE ONLY 45Meter Fee \$70Damage \$	Other \$
MOUNT PAID: Cash \$	Check \$_	Credit Ca	ard \$
.ccount # Transferred From:		Date To Turn Off	
CCOUNT #: CID:	LID:	WATER SEWER CDI	EDIT: APPROVED / DENIE

Turn On:____Unlock Only:____Read Only:___Install:____Customer Serv Rep: ___