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 10/7/21 Cor	ntract Date	Fees Due:	Deposit, Owner, Water Deposit, Owner, Sewer Deposit, Rental, Water	\$25 all accounts: \$15 \$50	
Date Service Requested			Deposit, Rental, Sewer		
This agreement is to request the Harne the District's Rules and Regulations, to	o provide water and /or se	ewer service co	nnections at the following	res and in accordance with g location:	
Service Address: RED	CEDAR WAY 065	3-66-8135	.000		
Owner_X Renter (PROPI	ERTY OWNER & PHONE NO.) <u>D.R. Ho</u>	rton Inc. 919-407-2	2037	
APPLICANT			CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FI	NAME (FIRST, LAST)		
D.R. Horton Inc.					
MAILING ADDRESS:					
2000 Aerial Center Parkway	Ste. 110A, Morrisv	ville NC 27	7560	_	
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL S	ECURITY # OR TIN	CONTACT PHONE #	
75-2386963	919-407-2037				
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S	S LICENSE # AND STATE	DATE OF BIRTH	
EMPLOYER NAME		EMPLOYI	EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYI	ER ADDRESS	PHONE #	
PREVIOUS ADDRESS		PREVIOU	PREVIOUS ADDRESS		
NAME OF NEAREST RELATIVE AND PHONE #		NAME OF	NAME OF NEAREST RELATIVE AND PHONE #		
I, the undersigned, do agree to abide to make all payments on time when due a further notice. In order for service to be from court action to collect on an access 1.00 will not be refunded. Property being used, until the property is solutional LOSS. Please ensure residence or farequesting water service. By signing this application, you are ag Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$ Account # Transferred From:	s stated on the WATER/S e restored, I will be require ount will be the responsit y owners will be respons d or rented. HARNET cility is prepared for wa reeing that you are at leas Ally Moss Same Da	EWER bill, the ed to pay ALL bility of the cusible for a more T COUNTY Inter connection at 18 years of a may \$45Me	e department has the right DUE amounts plus a \$40 astomer. FINAL BILLS onthly bill regardless of S NOT RESPONSIBLE n. Make sure all valves ge. eter Fee \$70Damage	t to disconnect my service without preconnect fee. Any fees resulting with a credit balance of less than whether water and/or sewer is E FOR WATER DAMAGE OR & faucets are turned off before \$	
ACCOUNT #: CID:	LID:	WATER	SEWERCRE	DIT: APPROVED / DENIED	
Turn On: Unlock Only:	Read Only:	_Install:	Customer Serv Re	ер:	