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	Contract Date		Fees Duc:	Deposit, Owner, Water Deposit, Owner, Sewer	\$25 \$25	Set Up Fee, all accounts: \$15	
Date Service Requested				Deposit, Rental, Water Deposit, Rental, Sewer	\$50 \$50	Meter Fee: \$70	
This agreement is to request t the District's Rules and Regu	he Harnett Cou lations, to prov	nty Department of Pul ide water and /or sewe	blic Utilities r service co	through normal procedure nnections at the following	es and in location	n accordance with	
Service Address: 143 Roc	king Canal F	PI, Erwin 28339					
Owner Renter	(PROPERTY, C	WNER & PHONE NO.) _	JSJ Build	ders, Inc. (910) 438-0	796		
APPLICANT			CO-APPLICANT				
NAME (FIRST, LAST)			NAME (FIRST, LAST)				
JSJ Builders, Inc.							
MAILING ADDRESS:							
1135 Robeson Street Fayetteville NC 28305							
SOCIAL SECURITY # OR TIN		ONTACT PHONE #	SOCIAL SI	ECURITY # OR TIN	CONTACT PHONE #		
20-0146507	(910) 438-0796					
DRIVER'S LICENSE # AND STA	ATE DA	ATE OF BIRTH	DRIVER'S	LICENSE # AND STATE	DATE	OF BIRTH	
N/A		N/A					
EMPLOYER NAME				EMPLOYER NAME			
JSJ Builders, Inc.							
EMPLOYER ADDRESS		PHONE #	EMPLOYE	EMPLOYER ADDRESS PHONE #		ONE #	
Same as applicant		Same as applicant			ļ		
PREVIOUS ADDRESS N/A			PREVIOUS ADDRESS				
NAME OF NEAREST RELATIVE AND PHONE # N/A			NAME OF NEAREST RELATIVE AND PHONE #				
I, the undersigned, do agree to make all payments on time who further notice. In order for ser from court action to collect of \$1.00 will not be refunded. In being used, until the proper LOSS. Please ensure resident requesting water service. By signing this application, you	nen due as stated vice to be resto an account we Property ownerty is sold or rence or facility.	d on the WATER/SEW red, I will be required to rill be the responsibilitiers will be responsibilitiers will be responsible ented. HARNETT Co is prepared for water that yourse at least 15	VER bill, the to pay ALL I ty of the cus le for a mon COUNTY IS	department has the right to DUE amounts plus a \$40 restomer. FINAL BILLS worthly bill regardless of we NOT RESPONSIBLE 15. Make sure all valves &	o disconection a creation of the connection of t	nnect my service without et fee. Any fees resulting edit balance of less than water and/or sewer is ATER DAMAGE OR	
Customer Signatu	re C	40 M	British Care Comment				
FOR OFFICE USE ONLY FEES: Set-Up Fee \$15I	Deposit \$	Same Day S		ter Fee \$70Damage \$			
Account # Transferred From:			Date To Turn Off				
ACCOUNT#: CID:		ID;	WATERSEWERCREDIT; APPROVED / DENIED				
Turn On:Unlock On	nly:R	ead Only:In	stall:	Customer Serv Rep):		