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 Con		Deposit, Rental, Water	\$25 all accounts: \$15 \$50
Date Service Requested		Deposit, Rental, Sewer	
This agreement is to request the Harnet the District's Rules and Regulations, to			
Service Address: 467 Silver Map	ole Drive Lot 36		
OwnerX Renter (PROPE	RTY OWNER & PHONE NO.) _	D.R. Horton Inc. 919-460-2	2922
APPLICANT		CO-APPLICANT	
NAME (FIRST, LAST)		NAME (FIRST, LAST)	
D.R. Horton Inc.			
MAILING ADDRESS:			
2000 Aerial Center Parkway	Ste. 110A, Morrisvill	e NC 27560	
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN	CONTACT PHONE #
75-2386963	919-460-2922		
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 #	
I, the undersigned, do agree to abide by make all payments on time when due as further notice. In order for service to be from court action to collect on an accoss \$1.00 will not be refunded. Property being used, until the property is sold LOSS. Please ensure residence or face requesting water service. By signing this application, you are agreed to consider the control of the c	restored, I will be required bunt will be the responsibility owners will be responsibility or rented. HARNETT (cility is prepared for water reeing that you are at least 1	VER bill, the department has the right to pay ALL DUE amounts plus a \$40 ity of the customer. FINAL BILLS of the for a monthly bill regardless of COUNTY IS NOT RESPONSIBLE or connection. Make sure all valves a 8 years of age.	to disconnect my service without reconnect 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
FEES: Set-Up Fee \$15Deposit \$_	Same Day	\$45Meter Fee \$70Damage	\$Other \$
Account # Transferred From:I		_Date To Turn Off	
ACCOUNT #: CID:	LID:	WATERSEWERCRE	DIT: APPROVED / DENIED

Turn On:_____Unlock Only:_____Read Only:____Install:_____ Customer Serv Rep: ___