

HARNETT REGIONAL WATER

Equal Opportunity Provider and Employer
Water User's Agreement

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

Today's Date <u>4-14-23</u> Set Up Fee All Accounts \$15 Same Day Service: \$50 Date Service Requested <u>ASAP</u>	DEPOSITS (refunded to applicant only) <table border="1" style="width: 100%; border-collapse: collapse; margin-top: 5px;"> <thead> <tr> <th style="width: 50%;"></th> <th style="width: 25%;">APPROVED CREDIT</th> <th style="width: 25%;">DENIED CREDIT</th> </tr> </thead> <tbody> <tr> <td>OWNER WATER</td> <td style="text-align: center;">\$0</td> <td style="text-align: center;">\$50</td> </tr> <tr> <td>OWNER SEWER</td> <td style="text-align: center;">\$0</td> <td style="text-align: center;">\$50</td> </tr> <tr> <td>RENTER WATER</td> <td style="text-align: center;">\$50</td> <td style="text-align: center;">\$100</td> </tr> <tr> <td>RENTER SEWER</td> <td style="text-align: center;">\$50</td> <td style="text-align: center;">\$100</td> </tr> </tbody> </table>		APPROVED CREDIT	DENIED CREDIT	OWNER WATER	\$0	\$50	OWNER SEWER	\$0	\$50	RENTER WATER	\$50	\$100	RENTER SEWER	\$50	\$100
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This agreement is a formal request for Harnett Regional Water (HRW), through normal procedures and in accordance with the HRW Water & Sewer Ordinance and all relevant departmental policies, to provide water and /or sewer service connections at the following location:

Service Address: 71 Kingsford LN Fuquay-Varina Lot 65Pck

Owner Renter _____ (PROPERTY OWNER & PHONE NO.) Mattamy in 5 919 533-8194

Applicant Email Address Raleigh_PlanReview@MattamyCorp.com

APPLICANT		CO-APPLICANT	
NAME (FIRST, LAST) Mattamy Homes		NAME (FIRST, LAST)	
MAILING ADDRESS: 11000 Regency Parkway Ste110 Cary, NC 27518			
SOCIAL SECURITY # OR TIN 562200817	CONTACT PHONE # 919-233-3886	SOCIAL SECURITY # OR TIN	CONTACT PHONE #
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE	DATE OF BIRTH
EMPLOYER NAME Mattamy homes		EMPLOYER NAME	
EMPLOYER ADDRESS 11000 Regency	PHONE # 919 533-8194	EMPLOYER ADDRESS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS	

I, the undersigned, do agree to abide by all rules, regulations and policies of Harnett Regional Water as outlined in the HRW Water and Sewer Ordinance. Should I fail to make all payments on time when due as stated on the WATER/SEWER bill, the department has the right to disconnect my service without further notice. In order for service to be restored, I will be required to pay ALL DUE amounts plus a \$40 reconnect fee. Any fees resulting from court action to collect on an account will be the responsibility of the customer. All initial and final bills are prorated based on the number of days in the service period. FINAL BILLS with a credit balance of less than \$3.00 will not be refunded. Deposits and/or credit balances are refunded in the applicant's name only. **Property owners will be responsible for a monthly bill regardless of whether water and/or sewer is being used, until the property is sold or rented. HARNETT REGIONAL WATER IS NOT RESPONSIBLE FOR WATER DAMAGE OR LOSS. Please ensure residence or facility is prepared for water connection. Make sure all valves & faucets are turned off before requesting water service.** By signing this application, you are agreeing that you are at least 18 years of age.

Customer Signature _____

FOR OFFICE USE ONLY
 FEES: Set-Up Fee \$15 ___ Deposit \$ ___ Same Day \$50 ___ Meter Fee \$325 ___ Damage \$ ___ Other \$ ___

Account # Transferred From: _____ Date To Turn Off: _____

ACCOUNT #: CID: 404326 LID: 215591 WATER ___ SEWER ___ CREDIT: APPROVED / DENIED

Turn On: ___ Unlock Only: ___ Read Only: ___ Install: ___ Customer Serv Rep: _____

Water + Sewer

Jeanann Dawson

From: Linda Scott
Sent: Monday, April 17, 2023 8:47 AM
To: Jeanann Dawson
Subject: 215591

Thank you. The following payment has been successfully submitted.

Payment Submitted

Confirmation number: 980070157
Payment Date: Apr 17, 2023 8:46:12 AM
Payment Type: Utility Deposit
Customer Number-account Number: 215591
Payment Method: MasterCard
Card Number: *****7164
Payment Amount: \$4,840.00
Total Amount Charged: \$4,840.00

[Make another payment](#)

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Paymentus down- Linda ran manually.

Linda Scott
Sr. Utility Customer Service
Harnett Regional Water
700 McKinney Pkwy
PO Box 1119
Lillington, NC 27546
910-893-7575 ext. 3224
910-893-6643 (fax)
910-814-4002 (Alt fax)
www.harnettwater.org
<https://paylink.harnett.org>
[View Water & Sewer Locations](#)



