

# 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>4/17/23</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:** 99 Kingsford Lane Fuquay Varina NC 27526

Owner      Renter      (PROPERTY OWNER & PHONE NO.) Mattamy Homes 919-214-2799

Applicant Email Address Raleigh\_PlanReview@MattamyCorp.com

APPLICANT		CO-APPLICANT	
NAME (FIRST, LAST) <b>Mattamy Homes</b>		NAME (FIRST, LAST)	
MAILING ADDRESS: <b>11000 Regency Parkway Ste110 Cary, NC 27518</b>			
SOCIAL SECURITY # OR TIN <b>562200817</b>	CONTACT PHONE # <b>919-233-3886</b>	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	

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: 215594    WATER \_\_\_\_\_ SEWER \_\_\_\_\_ CREDIT: APPROVED / DENIED

Turn On: \_\_\_\_\_    Unlock Only: \_\_\_\_\_    Read Only: \_\_\_\_\_    Install: \_\_\_\_\_    Customer Serv Rep: \_\_\_\_\_

Water + Sewer

## Jeanann Dawson

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**From:** Linda Scott  
**Sent:** Monday, April 17, 2023 8:50 AM  
**To:** Jeanann Dawson  
**Subject:** 215594

Thank you. The following payment has been successfully submitted.

### Payment Submitted

Confirmation number: 980071979  
Payment Date: Apr 17, 2023 8:49:34 AM  
Payment Type: Utility Deposit  
Customer Number-account Number: 215594  
Payment Method: MasterCard  
Card Number: \*\*\*\*\*7164  
Payment Amount: \$4,840.00  
Total Amount Charged: \$4,840.00

[Make another payment](#)

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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](http://www.harnettwater.org)  
<https://paylink.harnett.org>  
[View Water & Sewer Locations](#)



Harnett Regional Water  
700 McKinney Parkway  
Lillington, NC 27546  
Telephone: 910-893-7575  
harnettwater.org

User: CPCIS2 POS  
Date: 4/17/2023 18185 Receipt: 151413

**Customer Account Name**  
404326 215594 MATTAMY HOMES LLC  
99 KINGSFORD LM

**Misc Fees/POS/Sys Dev**

1	WATER SYSTEM DEVE	2,000.00
1	3/4" AMI METER & MXU	325.00
1	SETUP FEE	15.00
1	SEWER SYSTEM DEVE	2,500.00

Amount Due \$4,840.00

GRAND TOTAL: 4,840.00

DEBIT CARD \$(4,840.00)  
Total Payment: \$(4,840.00)

BALANCE REMAINING \$0.00

CHANGE \$0.00

Trans Date: Apr 17, 2023 Time: 8:53:53AM

\*\*\* Thank You For Your Payment \*\*\*  
\*\*\*\* Enroll in Auto Pay Today \*\*\*\*