## **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

04/06/0000		DEPOSITS (refunded to applicant only)		
Today's Date <u>04/06/2023</u> S	Set Up Fee All Accounts \$15	APPROVED CREDIT DENIED CREDIT		
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	Same Day Service. \$50	OWNER SEWER	\$0	\$50
Date Service Requested		RENTER WATER	\$50	\$100
1	-	RENTER SEWER	\$50	\$100
This agreement is a formal request for & Sewer Ordinance and all relevant de				
Service Address: 140 Hazelwood	d Rd, Lillington, NC 27	7546		
Owner_ V Renter (PROPI			es, Inc. 919-938	-8052
Applicant Email Address kristina@	)watermarkhomesnc.c	com		
APPLICAN	CO-APPLICANT			
NAME (FIRST, LAST)	NAME (FIRST, LAST)			
Watermark Homes, Inc.				
MAILING ADDRESS: 196 Annette Drive, Benson,	NC 27504			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY #	# OR TIN	CONTACT PHONE #
56-2232164	919-938-8052			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRES	SS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
I, the undersigned, do agree to abide be Sewer Ordinance. Should I fail to ma right to disconnect my service without a \$40 reconnect fee. Any fees resulting and final bills are prorated based on the not be refunded. Deposits and/or cred monthly bill regardless of whether wwater Is not responsible Fronnection. Make sure all valves & agreeing that you are at least 18 years of Customer SignatureFOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$40.000 for the count # Transferred From:	ke all payments on time who further notice. In order for so ag from court action to collect enumber of days in the servicit balances are refunded in the ater and/or sewer is being ut OR WATER DAMAGE Of faucets are turned off before age.  Same Day \$	en due as stated on the ervice to be restored, et on an account will ce period. FINAL Bie applicant's name oused, until the proper R LOSS. Please ensfore requesting water for the proper state of the proper requesting water for the proper state of the proper requesting water for the proper requesting water for the proper for the proper requesting water for the proper for the prop	ne WATER/SEWE I will be required t be the responsibili ILLS with a credit nly. Property own rty is sold or rente sure residence or f er service. By sig	R bill, the department has the pay ALL DUE amounts plats of the customer. All initional balance of less than \$3.00 with the customer will be responsible for ed. HARNETT REGIONA facility is prepared for wattening this application, you and the customer of
	Date To Turn Off:			
ACCOUNT #: CID:	LID:	_ WATERSE	WERCRED	IT: APPROVED / DENIE

Turn On:\_\_\_\_\_Unlock Only:\_\_\_\_\_Read Only:\_\_\_\_Install:\_\_\_\_\_ Customer Serv Rep: \_\_\_\_\_