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

1/10/2024		DEPOSITS (refunded to applicant only)		
Today's Date 1/10/2024 Se	et Up Fee All Accounts \$15	APPROVED CREDIT DENIED		EDIT DENIED CREDIT
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	•	OWNER SEWER	\$0	\$50
Date Service Requested WILL CAL	L	RENTER WATER	\$50	\$100
		RENTER SEWER	\$50	\$100
This agreement is a formal request for I & Sewer Ordinance and all relevant dep				
Service Address: 192 Old Montagu				
	RTY OWNER & PHONE NO.)		RS HOMES, LI	_C 910-486-4864
Applicant Email Address tamaragre	en@dreamfindershor	nes.com		
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
DREAM FINDERS HOMES,	LLC			
MAILING ADDRESS:				
14701 Philips Hwy Suite 300 Ja	cksonville Fla 32256			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY #	OR TIN	CONTACT PHONE #
	910-486-4864			
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 by Sewer Ordinance. Should I fail to makinght to disconnect my service without fa \$40 reconnect fee. Any fees resulting and final bills are prorated based on the	te all payments on time whe further notice. In order for se g from court action to collect number of days in the service	en due as stated on the prvice to be restored, et on an account will be period. FINAL B	ne WATER/SEWE I will be required to be the responsibili ILLS with a credit	R bill, the department has the pay ALL DUE amounts play of the customer. All initional balance of less than \$3.00 w
		* *		•
not be refunded. Deposits and/or credit monthly bill regardless of whether wa WATER IS NOT RESPONSIBLE FO connection. Make sure all valves & agreeing that you are at least 18 years of	OR WATER DAMAGE Of faucets are turned off bef of age.	R LOSS. Please ensore requesting water	er service. By sig	ning this application, you a
monthly bill regardless of whether waw MATER IS NOT RESPONSIBLE FO connection. Make sure all valves & agreeing that you are at least 18 years of Customer Signature	OR WATER DAMAGE Of faucets are turned off bef of age.	R LOSS. Please ensore requesting water	er service. By sig	ning this application, you a
monthly bill regardless of whether waw ATER IS NOT RESPONSIBLE FO connection. Make sure all valves & agreeing that you are at least 18 years of Customer Signature	OR WATER DAMAGE OF faucets are turned off before of the fage. Tammy Green	R LOSS. Please ens	er service. By sig	ning this application, you a
monthly bill regardless of whether wa WATER IS NOT RESPONSIBLE FO connection. Make sure all valves &	OR WATER DAMAGE OF faucets are turned off before of age. Tammy Green Same Day \$	R LOSS. Please ensore requesting water	er service. By sig	oning this application, you a

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