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

\mathbf{T}_{1} , \mathbf{D}_{4} $\mathbf{U}\mathbf{U}/\mathbf{U}/\mathbf{U}$	II. E. All A	DEPOSITS (refunded to applicant only)			
Today's Date <u>04/24/2024</u> Set	et Up Fee All Accounts \$15		APPROVED CREI	DIT DENIED CREDIT	
5	Same Day Service: \$50	OWNER WATER	\$0	\$50	
	•	OWNER SEWER	\$0	\$50	
Date Service Requested ASAP		RENTER WATER	\$50	\$100	
		RENTER SEWER	\$50	\$100	
his agreement is a formal request for H Sewer Ordinance and all relevant departments	artmental policies, to provid	de water and /or sewe			
ervice Address: 154 Eglin Drive,					
Owner X Renter (PROPER					
pplicant Email Address kristina@a	scotgrp.com				
APPLICANT		CO-APPLICANT			
NAME (FIRST, LAST)		NAME (FIRST, LAST	")		
The Ascot Corporation, LLC					
MAILING ADDRESS: PO Box 1872, Southern P	rines, NC 28388				
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN CONTACT PHONE #		CONTACT PHONE #	
27-4165229	910-688-7361				
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 #	
REVIOUS ADDRESS		PREVIOUS ADDRESS			
the undersigned, do agree to abide by ewer Ordinance. Should I fail to make ght to disconnect my service without fu \$40 reconnect fee. Any fees resulting nd final bills are prorated based on the rot be refunded. Deposits and/or credit nonthly bill regardless of whether wat WATER IS NOT RESPONSIBLE FO onnection. Make sure all valves & f greeing that you are at least 18 years of	e all payments on time whe rther notice. In order for se from court action to collect number of days in the service balances are refunded in the er and/or sewer is being u R WATER DAMAGE Of caucets are turned off bef	en due as stated on the ervice to be restored, at on an account will be period. FINAL Be applicant's name of sed, until the proper R LOSS. Please ensembles.	ne WATER/SEWER I will be required to be the responsibility ILLS with a credit be refully. Property owne orty is sold or rented sure residence or fa	bill, the department has the pay ALL DUE amounts play of the customer. All initial ance of less than \$3.00 wers will be responsible for l. HARNETT REGIONA cility is prepared for water	
Customer Signature <u> K</u>	. ~				
OR OFFICE USE ONLY EES: Set-Up Fee \$15Deposit \$	Same Day \$	50Meter Fee \$	325Damage \$	Other \$	
ZZST STT CP TTT VIZ Z CPOSIT V	Account # Transferred From: Date To Turn Off:				
		_ Date To Turn O	Off:		

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