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

20/40/2024		DEPOSITS (refunded to applicant only)		
Today's Date <u>06/19/2024</u> Set	Up Fee All Accounts \$15		APPROVED CREI	
5	Same Day Service: \$50	OWNER WATER	\$0	\$50
Same Day Service. 430		OWNER SEWER	\$0	\$50
Date Service Requested_Will Call_		RENTER WATER	\$50	\$100
This agreement is a formal request for Hazz Sewer Ordinance and all relevant depart				
ervice Address: 101 Frost Mead				
Owner X Renter (PROPER	FY OWNER & PHONE NO.) \Box	ORB Homes NC	LLC 919.279.2	2339
applicant Email Address_amoss@dr	bgroup.com			
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST) DRB Homes NC LLC	NAME (FIRST, LAST)			
MAILING ADDRESS: 1101 Slater Rd. Ste. 300 E	Ourham, NC 27703			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	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 ADDRES	SS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
the undersigned, do agree to abide by a sewer Ordinance. Should I fail to make ight to disconnect my service without fur. \$40 reconnect fee. Any fees resulting and final bills are prorated based on the nation be refunded. Deposits and/or credit be nonthly bill regardless of whether water WATER IS NOT RESPONSIBLE FOR onnection. Make sure all valves & for greeing that you are at least 18 years of	all payments on time when ther notice. In order for set from court action to collect umber of days in the service palances are refunded in the er and/or sewer is being up to the er and th	en due as stated on the ervice to be restored, et on an account will be period. FINAL Ble applicant's name of used, until the prope R LOSS. Please ens	ne WATER/SEWER I will be required to ple the responsibility ILLS with a credit bandy. Property owne rty is sold or rented sure residence or facer service. By significant	bill, the department has the pay ALL DUE amounts placed of the customer. All initial ance of less than \$3.00 wers will be responsible for a HARNETT REGIONA cility is prepared for wat
Customer Signature // FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$_	Dat	te: 2024.04.02 14:16:06 04'00'		Other \$
Account # Transferred From:	Date To Turn Off:			
ACCOUNT #: CID:	I ID•	WATER SE	WER CREDIT	: APPROVED / DENIE

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