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 9/19/24	Set Up Fee All Accounts \$15		DEPOSITS (refunded to applicant only)			
Today S Date				APPROVED CRE		
	Samo	e Day Service: \$50	OWNER WATER OWNER SEWER	\$0 \$0	\$50 \$50	
Date Service Requested			RENTER WATER	\$0 \$50	\$100	
Date Service Requested			RENTER SEWER	\$50	\$100	
This agreement is a formal request for & Sewer Ordinance and all relevant or						
Service Address: 420 Blue Asp	en Dri	ve Lot 115				
Owner_X Renter(PRO			.R. Horton Inc.	984-327-8357		
Applicant Email Address jnupchur	ch@d	rhorton.com				
APPLICANT			CO-APPLICANT			
NAME (FIRST, LAST)			NAME (FIRST, LAST	")		
D.R. Horton Inc.						
MAILING ADDRESS:						
2000 Aerial Center Pkwy S	te. 110	O-A Morrisville, NO	C 27560			
SOCIAL SECURITY # OR TIN		ONTACT PHONE #	SOCIAL SECURITY # OR TIN CONTACT PHONE #		CONTACT PHONE #	
75-2386963	98	4-327-8357				
DRIVER'S LICENSE # AND STATE		ATE OF BIRTH	DRIVER'S LICENSE	# AND STATE	DATE OF BIRTH	
EMPLOYER NAME		EMPLOYER NAME				
EWI LOTER WAIVIE			EMITLO I EK NAME			
EMPLOYER ADDRESS		PHONE #	EMPLOYER ADDRESS		PHONE #	
PREVIOUS ADDRESS		PREVIOUS ADDRESS				
I, the undersigned, do agree to abide Sewer Ordinance. Should I fail to might to disconnect my service without a \$40 reconnect fee. Any fees result and final bills are prorated based on the not be refunded. Deposits and/or cremonthly bill regardless of whether REGIONAL WATER IS NOT REPROPERED TO WATER IS NOT REPROPERED TO WATER IS NOT REPROPERED TO WATER STATE OF THE	nake all it further ing from he numb dit balan water a ESPON lake sun a are at l	payments on time whe r notice. In order for se n court action to collecter of days in the service are refunded in the nd/or sewer is being u (SIBLE FOR WATE) re all valves & faucet least 18 years of age.	n due as stated on the rvice to be restored, to on an account will be period. FINAL Be applicant's name of seed as long as the set of the period. The second of the second	he WATER/SEWER I will be required to be the responsibility ILLS with a credit b nly. Property ownervice is not turned LOSS. Please ens fore requesting wa	R bill, the department has a pay ALL DUE amounts p y of the customer. All initial palance of less than \$3.00 vers will be responsible for off by request. HARNE ure residence or facility ater service. By signing the	
Account # Transferred From:						
ACCOUNT #: CID:						
ACCOUNT #: CID:	I	ли;	WAIEKSE	WERCREDI	I. AFFRUYED / DENIE	

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