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

T 1 1 D .	. II II	DEPOSITS (ref	funded to applicant o	nly)
Today's Date Se	t Up Fee All Accounts \$15		APPROVED CREI	DIT DENIED CREDIT
	Same Day Service: \$50	OWNER WATER	\$0	\$50
		OWNER SEWER	\$0	\$50
Date Service Requested Will Call		RENTER WATER	\$50	\$100
This agreement is a formal request for H	Jarnett Regional Water (HR	W) through normal	procedures and in ac	\$100
Sewer Ordinance and all relevant dep				
Service Address: 192 Paper Birch	Way Lot 133			
Owner X Renter (PROPER		D.R. Horton Inc.	984-327-8357	
Applicant Email Address jnupchurch	@drhorton.com			
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST	[]	
D.R. Horton Inc.				
MAILING ADDRESS:				
2000 Aerial Center Pkwy Ste.	. 110-A Morrisville, N	C 27560		
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN CONTACT PHONE #		
75-2386963	984-327-8357			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRE	ss	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
the undersigned, do agree to abide by sewer Ordinance. Should I fail to make ight to disconnect my service without for \$40 reconnect fee. Any fees resulting and final bills are prorated based on the not be refunded. Deposits and/or credit monthly bill regardless of whether was REGIONAL WATER IS NOT RESPONDED.	e all payments on time whe urther notice. In order for se g from court action to collect number of days in the service balances are refunded in the ter and/or sewer is being u PONSIBLE FOR WATE the sure all valves & faucet are at least 18 years of age.	en due as stated on the ervice to be restored, et on an account will be period. FINAL Be applicant's name of used as long as the ser DAMAGE OR Its are turned off be	he WATER/SEWER I will be required to be the responsibility ILLS with a credit be only. Property owne ervice is not turned LOSS. Please ensu- effore requesting wa	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 off by request. HARNET are residence or facility ter service. By signing the
application, you are agreeing that you a				
	nniter Upenuren			
Inplication, you are agreeing that you are constant of the control	•			
Customer Signature	Same Day \$	50Meter Fee \$	325Damage \$	Other \$

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