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

- 40/04/04		DEPOSITS (refunded to applicant only)		
Today's Date	Set Up Fee All Accounts \$15	i	APPROVED CRE	DIT DENIED CREDIT
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	Same Day Service. \$50	OWNER SEWER	\$0	\$50
Date Service Requested Will Call	_	RENTER WATER	\$50	\$100
		RENTER SEWER	\$50	\$100
This agreement is a formal request for & Sewer Ordinance and all relevant described For Address: 75 Fair Child F	epartmental policies, to prov			
OwnerX Renter (PROF		D.R. Horton Inc.	984-327-8357	
Applicant Email Address jnupchure	ch@drhorton.com			
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST	")	
D.R. Horton Inc.				
MAILING ADDRESS:				
2000 Aerial Center Pkwy St	e. 110-A Morrisville, N	IC 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	<u> </u>	
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRE	SS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
f, the undersigned, do agree to abide Sewer Ordinance. Should I fail to might to disconnect my service without \$40 reconnect fee. Any fees resulting a final bills are prorated based on the not be refunded. Deposits and/or creamonthly bill regardless of whether varieties of water connection. Mapplication, you are agreeing that you	ake all payments on time what further notice. In order for any from court action to college number of days in the service to be a number of days in the service to the serv	ten due as stated on the service to be restored, but on an account will ice period. FINAL But he applicant's name oused as long as the see ER DAMAGE OR	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	the bill, the department has to pay ALL DUE amounts play of the customer. All initial alance of less than \$3.00 wers will be responsible for off by request. HARNET our residence or facility
Customer Signature <u>Je</u> FOR OFFICE USE ONLY	ennifer Upchurch			
FEES: Set-Up Fee \$15Deposit	•			
Account # Transferred From:		Date To Turn C	Off:	
ACCOUNT #: CID:	LID:	WATER SE	WER CREDIT	Γ: APPROVED / DENIE

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