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 12/20/24 Set Up Fee All Accounts \$15 Same Day Service: \$50		DEPOSITS (refunded to applicant only)		
		APPROVED CREDIT DENIED CRED		
		OWNER WATER	\$0	\$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 Har & Sewer Ordinance and all relevant depart Service Address: 48 Serene Crossing	mental policies, to provi			
Owner X Renter (PROPERTY	OWNER & PHONE NO.) _	Tri Pointe Home	s Holdings Ll	LC / 919-300-4901
Applicant Email Address Raleighperm	its@tripointehome	s.com		
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)	NAME (FIRST, LAST)			
Tri Pointe Homes Holdings LLC				
MAILING ADDRESS:				
5440 Wade Park Blvd, Raleigh, No	C, 27607			T
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY #	OR TIN	CONTACT PHONE #
TIN: 27-3201111	31-905-1999			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE	# AND STATE	DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
Tri Pointe Homes Holdings LLC				
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRES	SS	PHONE #
5440 Wade Park Blvd - Suite 400, Raleigh, NC 27	607 919-300-4901			
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
the undersigned, do agree to abide by all Sewer Ordinance. Should I fail to make a right to disconnect my service without furth \$40 reconnect fee. Any fees resulting from final bills are prorated based on the number of the refunded. Deposits and/or credit based on the propagation of the propagatio	all payments on time when the notice. In order for some court action to colle mber of days in the servillances are refunded in the and/or sewer is being DNSIBLE FOR WATH sure all valves & fauce at least 18 years of age	en due as stated on the ervice to be restored, ct on an account will ice period. FINAL Blue applicant's name or used as long as the seER DAMAGE OR Its are turned off before.	le WATER/SEWI I will be required be the responsibil LLS with a credit aly. Property ow revice is not turned LOSS. Please en fore requesting v	ER bill, the department has the to pay ALL DUE amounts plus lity of the customer. All inition to balance of less than \$3.00 with the total balance of less than \$4.00 with the total balance of less than \$5.00 with the total balance of the to
Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15 Deposit \$				Other \$
Account # Transferred From:	-			
ACCOUNT #: CID:				
Furn On:Unlock Only:	_Read Only:Ins	tall: Cust	omer Serv Rep:	