KC097

Fax#910-814-4002 or upload to www.sendthisfile.com/harnett, recipient utilitybilling@harnett.org

HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES

Equal Opportunity Provider and Employer

Water User's Agreement

RALESCH SOUNT be Completed in Full Before Service is Made Available. I.D. is Required.

DEPOSITS BELOW APPLY TO APPROVED CREDIT ONLY

***DEPOSITS	BELOW APPLY TO APP	KOVED CKEDI	it Oremon Woton	\$25 Set Up Fee,
Today's Date MAR 1 0 2025 Contract Date		Fees Due: Depos Depos	it, Owner, Water	\$25 set Opree, \$25 all accounts: \$15
		Depos	sit, Rental, Water	\$50
Date Service Requested This agreement is to request the Harnett County Department of Pub			it, Rental, Sewer	\$50 Meter Fee: \$70
the District's Rules and Regulations, to	provide water and for sewer	olic Utilities through r service connection	n normal procedure is at the following	location:
Service Address: 45 Piv	er Chapel	Dr.		
Service Address.		Idams H	lomes (c)	Istomer# 228916
Owner_V Renter(PROPE	RTY OWNER & PHONE NO.)	aleighper	nis@a	dams homes.co
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
Amanda Allen per	mit coordinator			
MAILING ADDRESS:	c ond	1 2000	C-ANA E	1 20500
100 W. Garden St	. (att. and	idmin) Pen	sacola, P	1,5000d
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY	# OR TIN	CONTACT PHONE #
	9192336747			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSI	E# AND STATE	DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
Adams Homes AEC, LLC				
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDR	ESS	PHONE #
	91923310747			
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
NAME OF NEAREST RELATIVE AND PHONE #		NAME OF NEAREST RELATIVE AND PHONE #		
I, the undersigned, do agree to abide by make all payments on time when due as further notice. In order for service to be from court action to collect on an according	restored, I will be required to	o pay ALL DUE am	nounts plus a \$40 re FINAL BILLS w	econnect fee. Any fees resulting ith a credit balance of less that
\$1.00 will not be refunded. Property	owners will be responsible	OUNTY IS NOT	RESPONSIBLE	FOR WATER DAMAGE OF
LOSS. Please ensure residence or fac	ility is prepared for water	connection. Make	sure all valves &	faucets are turned off before
requesting water service. By signing this application, you are agree	eing that you are at least 18	years of age.		
Customer Signature	de or rule of	llen		
FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$_	Same Day \$:	50Meter Fee :	\$70Damage \$_	Other \$
Account # Transferred From:				
ACCOUNT #: CID:				
Tunn One Unlock Only:	Read Only: Ins	tall: Cı	ustomer Serv Rep);