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

		VALIDITIOIC	1.D. is Kequiteu		
00/00/00=			DEPOSITS (refunded to applicant only)		
Today's Date <u>03/20/2025</u>	Set Up Fee All Accounts \$15		APPROVED CREDIT DENIED CREDIT		
	Sam	e Day Service: \$50	OWNER WATER	\$0	\$50
	Sam	e Day Service. \$30	OWNER SEWER	\$0	\$50
Date Service Requested Will Call			RENTER WATER	\$50	\$100
<u> </u>			RENTER SEWER	\$50	\$100
This agreement is a formal request & Sewer Ordinance and all relevant	nt departm	ental policies, to provid	le water and /or sewe		
Service Address: 378 Peach C					
OwnerX Renter(PF			RB Homes - NC	LLC/919.279.2	2339
Applicant Email Address amoss	@drbgr	oup.com			
APPLICANT			CO-APPLICANT		
NAME (FIRST, LAST)			NAME (FIRST, LAST)		
DRB Homes NC LLC					
MAILING ADDRESS:					
1101 Slater Rd. Ste. 300	Durhan	n, NC 27703			
SOCIAL SECURITY # OR TIN	CO	ONTACT PHONE #	SOCIAL SECURITY # OR TIN		CONTACT PHONE #
DRIVER'S LICENSE # AND STATE	D/	ATE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH
EMPLOYER NAME			EMPLOYER NAME		
EMPLOYER ADDRESS		PHONE #	EMPLOYER ADDRESS		PHONE #
PREVIOUS ADDRESS			PREVIOUS ADDRESS		
I, the undersigned, do agree to abid Sewer Ordinance. Should I fail to right to disconnect my service with a \$40 reconnect fee. Any fees resulted in the service with a ser	o make all nout furthe ulting from the numberedit bala er water a LE FOR Wes & fauctors of age	payments on time when repayments on time when repayments. In order for seem court action to collect ber of days in the service nees are refunded in the and/or sewer is being us WATER DAMAGE OF ets are turned off before.	n due as stated on the rvice to be restored, at on an account will be period. FINAL Black applicant's name of sed, until the proper R LOSS. Please ensure requesting water	ne WATER/SEWI I will be required be the responsibil ILLS with a credit only. Property ow rty is sold or rent sure residence or ser service. By si	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 were swill be responsible for ted. HARNETT REGIONAL facility is prepared for water gining this application, you a
Account # Transferred From:					στικί ψ <u></u>
		LID:			
ACCOUNT #: CID:		1.117:	WAIRK SE	WER CRED	DIT: APPROVED / DENIE

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