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

0.4/0.0/0.05	DEPOSITS (refunded to applicant only)				
Today's Date <u>04/30/2025</u> Se	t Up Fee All Accounts \$15	APPROVED CR		EDIT DENIED CREDIT	
	Same Day Service: \$50	OWNER WATER	\$0	\$50	
	bunic Buy Bervice. \$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 F & Sewer Ordinance and all relevant dep	partmental policies, to provi				
Service Address: 380 Shelby M		DRB Homes NC	CII C 010 27	0.2220	
Owner Renter (PROPE	RTY OWNER & PHONE NO.) _			9-2339 	
Applicant Email Address amoss	@drbgroup.com				
APPLICANT		CO-APPLICANT			
NAME (FIRST, LAST)	NAME (FIRST, LAST)				
DRB Homes NC LLC					
MAILING ADDRESS:					
1101 Slater Rd. Ste. 300 Du	irham, NC 27703				
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN		CONTACT PHONE #	
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH	
EMPLOYER NAME		EMPLOYER NAME			
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRES	SS	PHONE #	
PREVIOUS ADDRESS	IOUS ADDRESS		PREVIOUS ADDRESS		
, the undersigned, do agree to abide by	all rules regulations and r	oolicies of Harnett Re	gional Water as o	utlined in the HRW Water a	
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	e all payments on time wh urther notice. In order for s g from court action to colle- number of days in the servi	en due as stated on the ervice to be restored, ct on an account will the period. FINAL Bl	ne WATER/SEWI I will be required be the responsibil ILLS with a credit	ER bill, the department has the top ay ALL DUE amounts plaity of the customer. All inition balance of less than \$3.00 w.	
not be refunded. Deposits and/or credit monthly bill regardless of whether wa WATER IS NOT RESPONSIBLE FO connection. Make sure all valves &	ter and/or sewer is being to OR WATER DAMAGE Of faucets are turned off be	used, until the prope OR LOSS. Please ens	rty is sold or rent sure residence or	ed. HARNETT REGIONA facility is prepared for wat	
greeing that you are at least 18 years of Customer Signature	Allen Ave	Man.			
OR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$_	Same Day S	\$50Meter Fee \$.	325Damage \$	Other \$	
Account # Transferred From:	Date To Turn Off:				
ACCOUNT #: CID:	LID:	WATER SE	WER CRED	OIT: APPROVED / DENIE	
10000111 II. OID.		_ WHILKSE	,, EKCKED	II, MII KO (ED / DEMIE)	

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