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

| π , π , $5/1/25$ | TT TO 144 | DEPOSITS (refunded to applicant only) | | |
|--|---|--|---|---|
| Today's Date <u>5/1/25</u> Set | t Up Fee All Accounts \$15 | | APPROVED CRE | DIT DENIED CREDIT |
| 5 | Same Day Service: \$50 | OWNER WATER | \$0 | \$50 |
| | Jame Baj Service: 400 | OWNER SEWER | \$0 | \$50 |
| Date Service Requested Will Call | | RENTER WATER | \$50 | \$100 |
| | | RENTER SEWER | \$50 | \$100 |
| his agreement is a formal request for H Sewer Ordinance and all relevant departments | ertmental policies, to provid | | | |
| ervice Address: 57 Greenwillow I | | | 004 007 0057 | |
| owner_XRenter(PROPER | | J.R. HOπon Inc. | 984-327-8357 | |
| pplicant Email Address jnupchurch | @drnorton.com | | | |
| APPLICANT | | CO-APPLICANT | | |
| NAME (FIRST, LAST) | | NAME (FIRST, LAST | ') | |
| D.R. Horton Inc. | | | | |
| MAILING ADDRESS: | | | | |
| 2000 Aerial Center Pkwy Ste. | 110-A Morrisville, N | C 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 DA | | DATE OF BIRTH |
| EMPLOYER NAME | | EMPLOYER NAME | | |
| EMPLOYER ADDRESS | PHONE # | EMPLOYER ADDRE | SS | PHONE # |
| PREVIOUS ADDRESS | | PREVIOUS ADDRESS | | |
| the undersigned, do agree to abide by | all rules regulations and p | olicies of Harnett Re | egional Water as out | lined in the HRW Water a |
| ewer Ordinance. Should I fail to make ght to disconnect my service without fu \$40 reconnect fee. Any fees resulting nd final bills are prorated based on the rot be refunded. Deposits and/or credit nonthly bill regardless of whether wat EEGIONAL WATER IS NOT RESI repared for water connection. Make pplication, you are agreeing that you are | all payments on time when rther notice. In order for section court action to collect from court action to collect number of days in the service palances are refunded in the er and/or sewer is being up PONSIBLE FOR WATE as sure all valves & faucet | en due as stated on the ervice to be restored, et on an account will be period. FINAL Be applicant's name of used as long as the set R DAMAGE OR 1 | he WATER/SEWER I will be required to be the responsibility ILLS with a credit b only. Property own ervice is not turned LOSS. Please ens | R bill, the department has the pay ALL DUE amounts plut y of the customer. All initial alance of less than \$3.00 with the pay and the pay are will be responsible for off by request. HARNET ure residence or facility |
| Customer Signature <u>Jenn</u> | ifer Upchurch | | | |
| OD OFFICE LICE ONLY | • | | | |
| OR OFFICE USE ONLY EES: Set-Up Fee \$15Deposit \$ | Same Day \$ | 50Meter Fee \$ | 525Damage \$ | Other \$ |
| EES: Set-Up Fee \$15Deposit \$.ccount # Transferred From: | | | | |

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