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

5 20 2025		DEPOSITS (refunded to applicant only)		
Today's Date <u>5.20.2025</u> S	Set Up Fee All Accounts \$15	, in the second	APPROVED CRE	EDIT DENIED CREDIT
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	Same Day Service. \$50	OWNER SEWER	\$0	\$50
Date Service Requested	_	RENTER WATER	\$50	\$100
	II "D ' 1W (ID	RENTER SEWER	\$50	\$100
This agreement is a formal request for a Sewer Ordinance and all relevant de	epartmental policies, to provide	de water and /or sewe	er service connection	
ervice Address: 289 Education D	or Spring Lake, NC 2839	90 Lot 1143 AC		
Owner X Renter (PROP				
Applicant Email Address Permitting	g@ascotgrp.com	T		
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
The Ascot Corporation, LLC				
MAILING ADDRESS:				
PO BOX 1872, Southern Pines	NC 28388			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN CONTACT PHONE #		
27-4165229	910-688-7361			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE DATE OF BIR		DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRES	SS	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS	S	
the undersigned, do agree to abide be sewer Ordinance. Should I fail to make the sewer Ordinance ight to disconnect my service without a \$40 reconnect fee. Any fees resulting the final bills are prorated based on the total be refunded. Deposits and/or creding the second in the seco	take all payments on time who further notice. In order for so ag from court action to collect the number of days in the service it balances are refunded in the vater and/or sewer is being us for WATER DAMAGE Of a faucets are turned off before age.	en due as stated on the ervice to be restored, et on an account will be period. FINAL Blue applicant's name of ased, until the proper R LOSS. Please ensore requesting water	ne WATER/SEWEF I will be required to be the responsibility ILLS with a credit b nly. Property own rty is sold or renter sure residence or fa er service. By sign	R bill, the department has the pay ALL DUE amounts play of the customer. All initional palance of less than \$3.00 was sers will be responsible for d. HARNETT REGIONAl acility is prepared for water ining this application, you a
Customer Signature Sheror office use only FEES: Set-Up Fee \$15Deposit \$				
Account # Transferred From:		_ Date To Turn O	off:	
ACCOUNT #: CID:	LID:	WATERSE	WERCREDI	T: APPROVED / DENIE

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