## HARNETT REGIONAL WATER Equal Opportunity Provider and Employer Water User's Agreement

Available Form M

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usi	Dec	Ottipiece	DITOT	O I D ic	Require	rt
		VALID	PHOTO	) 1.12 13	Medicine	

	DEPOSITS (ret	funded to applica	nt only)	
Today's Date 5 31 35 Set Up Fee All Accounts S1		APPROVED C		
Today's Date Start of Set of recognition		SO	\$50	
Same Day Service S50	OWNER WATER	SO	\$50	
,	OWNER SEWER	\$50	0012	
Date Service Requested	RENTER WATER	550	\$100	
,	RENTER SEWER	durac and I	n accordance with the HRW V	
Sewer Ordinance and all relevant departmental potential	COLONY DREAM FINDER	e Lexino	cton lot 45°	
pplicant Email Address MACKENZIEW ested	TOOK TIME	s homes. C CO-APPLIC	70111	
APPLICANT			7171	
NAVE (FRST LAST)	NAME (FIRST LAST	NAME (FIRST LAST)		
DREAM FINDERS HOMES, LLC				
MAILING ADDRESS 14701 Philips Hwy, Ste 300 Jacksonville Fla 32	256		CONTACT PHONE =	
SOCIAL SECURITY = OR TO CONTACT PHONE = 910486-4864-214	SOCIAL SECURITY			
DRIVER'S LICENSE = AND STATE DATE OF BRITH	DRIVER & LICENSE	= 4ND 574FE	DATE OF SERTH	
ENDLOYER NAME	EMPLOYER VANE			
EMPLOYER ADDRESS PHONE =	EMPLOYER ADDRE	ESS	PHONE =	
PREVIOUS ADDRESS	PREVIOUS ADDRES	SS		
the undersigned, do agree to abide by all rules, regulations and ewer Ordinance. Should I fail to make all payments on time we ght to disconnect my service without further notice. In order to \$40 reconnect fee. Any fees resulting from court action to color final bills are prorated based on the number of days in the service refunded. Deposits and or credit balances are refunded in conthly bill regardless of whether water and/or sewer is being water IS NOT RESPONSIBLE FOR WATER DAMAGE.	r service to be restored llect on an account will rvice period FINAL Enthe applicant's name of gused, until the prop	I will be required to the rise responsibilities of the	bility of the customer. All in dit balance of less than \$3.00 owners will be responsible functed. HARNETT REGION or facility is prepared for w	
onnection. Make sure all talses of latters are	ionard			
Justomer Signature 11/10/06/11/10		\$325 Damag	os Other 5	
Customer Signature Mackenge Report of State of Signature Mackenge Report of State on the State of S	11.250 - 41616116	Ou		
EES: Set-Up Fee 315 Deposit 5 Same Da	Date To Turn	OII		
Customer Signature YIMCKempt Neoroffice Use Only  EES: Set I p Fee 315 Deposit 3 Same Da  Account # Transferred From:  ACCOUNT #: CID:  LID:  Third On: Linlock Only: Read Only:	Date To Tuid WATERS	EWERCR	EDIT APPROVED DEV	