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

T- 1?- D-4-	Saatta Eas All Assessment 615	DEPOSITS (refunded to applicant only)		
Today's Date S	Set Up Fee All Accounts \$15		APPROVED CREI	DIT DENIED CREDIT
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	•	OWNER SEWER	\$0	\$50
Date Service Requested	_	RENTER WATER	\$50	\$100
This agreement is a formal request for	Harnott Pagional Water (HP	RENTER SEWER	\$50	\$100
& Sewer Ordinance and all relevant de	epartmental policies, to provide	de water and /or sew	er service connection	s at the following location:
Service Address: <u>17 Comfort Co</u> Owner X Renter (PROP				 2 1505
Applicant Email Address		•	3 LLO / 9 19.008	7. 1303
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
Weekley Homes LLC				
MAILING ADDRESS:				
1901 N. Harrison Ave., Suite	e 200, Cary NC 27513			
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY # OR TIN CONTACT PHONE #		
76-0519106	919.659.1505			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRE	ss	PHONE #
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
I, the undersigned, do agree to abide be Sewer Ordinance. Should I fail to maright to disconnect my service without a \$40 reconnect fee. Any fees resulting and final bills are prorated based on the not be refunded. Deposits and/or credimonthly bill regardless of whether wwater Is not responsible Fronnection. Make sure all valves agreeing that you are at least 18 years Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$40.	ake all payments on time whe further notice. In order for seing from court action to collect enumber of days in the servicit balances are refunded in the vater and/or sewer is being us for WATER DAMAGE Of a faucets are turned off befor age. Sobin Caparell Same Day \$	en due as stated on the ervice to be restored, at on an account will be period. FINAL B applicant's name of sed, until the proper R LOSS. Please endore requesting wat some sed, until the proper requesting wat some proper requesting wat some proper sequesting wat sequesting wa	he WATER/SEWER I will be required to be the responsibility ILLS with a credit ba only. Property owne erty is sold or rented sure residence or fa er service. By sign	bill, the department has the pay ALL DUE amounts play of the customer. All initial ance of less than \$3.00 wers will be responsible for a substitution of the customer. HARNETT REGIONA cility is prepared for wathing this application, you a substitution of the customer of the customer. The customer of the customer of the customer of the customer of the customer. The customer of the customer. The customer of the customer. The customer of the cus
ACCOUNT #: CID:LID:		_ Date To Turn Off:		

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