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

		DEPOSITS (refunded to applicant only)		
Today's Date 6/20/25 Set Up Fee	All Accounts \$15	APPROVED CREDIT DENIED CREDIT		
	Same Day Service: \$50	OWNER WATER	\$0	\$50
	sume Buy service: \$e0	OWNER SEWER	\$0	\$50
Date Service Requested (Will Call)		RENTER WATER	\$50	\$100
		RENTER SEWER	\$50	\$100
This agreement is a formal request for H & Sewer Ordinance and all relevant departments Address: 244 Streamside T	artmental policies, to provi errace	ide water and /or sewe	r service connecti	ions at the following location:
Owner X Renter (PROPER			s Holdings Ll	LC / 919-300-4901
Applicant Email Address Raleighper	mits@tripointehome	s.com		
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
Tri Pointe Homes Holdings LLC				
MAILING ADDRESS:				
5440 Wade Park Blvd, Raleigh, I	NC, 27607	T		T .
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIAL SECURITY #	OR TIN	CONTACT PHONE #
TIN: 27-3201111	631-905-1999			
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S LICENSE #	# AND STATE	DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
Tri Pointe Homes Holdings LLC				
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRES	SS	PHONE #
5440 Wade Park Blvd - Suite 400, Raleigh, NC	27607 919-300-4901			
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
the undersigned, do agree to abide by Sewer Ordinance. Should I fail to make ight to disconnect my service without fur \$40 reconnect fee. Any fees resulting and final bills are prorated based on the mother be refunded. Deposits and/or credit monthly bill regardless of whether was REGIONAL WATER IS NOT RESID repared for water connection. Make application, you are agreeing that you are	e all payments on time wherther notice. In order for some court action to collect the collect that the court action to collect the collect that the collect tha	en due as stated on the ervice to be restored, let on an account will like period. FINAL BI ne applicant's name or used as long as the se ER DAMAGE OR Its are turned off before the ervice of the second of the ervice of the erv	e WATER/SEWI I will be required be the responsibil LLS with a credit aly. Property ow rvice is not turned OSS. Please en fore requesting v	ER bill, the department has the to pay ALL DUE amounts plus lity of the customer. All inition to balance of less than \$3.00 with the total balance of less than \$4.00 with the total balance of less t
Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$_	Same Day S	\$50Meter Fee \$3	325Damage \$	Other \$
Account # Transferred From:		Date To Turn O	ff:	
ACCOUNT #: CID:				
Гurn On: Unlock Only:	Read Only: Inst	tall: Cust	omer Serv Rep:	