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

0/05/0005		DEPOSITS (refunded to applicant only)		
Today's Date 6/25/2025 Set Up Fee All Accounts \$15 Same Day Service: \$50		APPROVED CREDIT DENIED CREDIT		
		OWNER WATER	\$0	\$50
		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: 87 Firefly Ln	artmental policies, to provi	ide water and /or sewe	er service connect	ions at the following location:
Owner X Renter (PROPER			s Holdings Ll	_C / 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			
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 right to disconnect my service without further \$40\$ reconnect fee. Any fees resulting and final bills are prorated based on the not be refunded. Deposits and/or credit monthly bill regardless of whether was REGIONAL WATER IS NOT RESID OF THE STONE IN TH	e all payments on time what ther notice. In order for some court action to collect the number of days in the service balances are refunded in the ter and/or sewer is being the PONSIBLE FOR WATE as sure all valves & fauce at least 18 years of age	en due as stated on the service to be restored, is ct on an account will ice period. FINAL BI ne applicant's name or used as long as the seER DAMAGE OR Its are turned off before.	the WATER/SEWI I will be required be the responsibil LLS with a credit rely. Property ow revice is not turned LOSS. 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	4	lames Myers		
FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$_				
Account # Transferred From:		Date To Turn O	ff:	
ACCOUNT #: CID:	LID:	_ WATERSEV	WERCRED	DIT: APPROVED / DENIEJ
Гurn On: Unlock Only:			omer Serv Rep:	