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

Today's Date 6.19.2025 Set Up Fee All Accounts \$15		DEPOSITS (refunded to applicant only)		
Today S DateSct	op rec all accounts \$13		APPROVED CRE	DIT DENIED CREDIT
5	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 H	arnott Dagional Water (UD)	RENTER SEWER	\$50	\$100
z Sewer Ordinance and all relevant department department and all relevant department of Sewer Ordinance and all relevant department department of Sewer Ordinance and all relevant department department of Sewer Ordinance and all relevant department of Sewer Ordinance and Sewer Ordinance an	artmental policies, to provid		er service connection	ns at the following location
OwnerX Renter (PROPER	TY OWNER & PHONE NO.)			
Applicant Email Address Permitting	@ascotgrp.com			
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST	")	
The Ascot Corporation, LLC				
MAILING ADDRESS:				
PO BOX 1872, Southern Pines N	IC 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 BIRTH		DATE OF BIRTH
EMPLOYER NAME		EMPLOYER NAME		
EMPLOYER ADDRESS	PHONE #	EMPLOYER ADDRE	SS	PHONE #
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 report to be refunded. Deposits and/or credit monthly bill regardless of whether wat WATER IS NOT RESPONSIBLE FOR Connection. Make sure all valves & fingreeing that you are at least 18 years of Customer Signature Customer Signature Customer Signature State of the State of Section 18 years of the State of Section 18 years of the Secti	e all payments on time whe rther notice. In order for se from court action to collect number of days in the service balances are refunded in the er and/or sewer is being u R WATER DAMAGE Of aucets are turned off befage.	en due as stated on the ervice to be restored, at on an account will be period. FINAL Be applicant's name of sed, until the proper R LOSS. Please ensure requesting wat	he WATER/SEWER I will be required to be the responsibility ILLS with a credit be only. Property owne erty is sold or rentee sure residence or fa er service. By sign	the bill, the department has to pay ALL DUE amounts play of the customer. All initial alance of less than \$3.00 wers will be responsible for the latest than \$1.00 Auxiliary is prepared for wathing this application, you are
EES. Set of tee 415Deposit 4				
Account # Transferred From:				

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