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 CR	EDIT 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 & Sewer Ordinance and all relevant de				
Service Address.		 Tri Pointe Home	s Holdinas I I	_C / 919-300-4901
Owner_x Renter(PROPI Applicant Email Address Raleighpe	ERTT OWNER & THONE NO.) _			
Applicant Email Address Naicign pe		1		
APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)	NAME (FIRST, LAST)			
Tri Pointe Homes Holdings LL0				
MAILING ADDRESS:				
5440 Wade Park Blvd, Raleigh	, 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, N	IC 27607 919-300-4901			
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
I, the undersigned, do agree to abide be Sewer Ordinance. Should I fail to make the sewer Ordinance. Should I fail to make the sewer Ordinance of the sewer ordinance or the sewer ordinance ordinance or the sewer ordinance or the sewer ordinance or the sewer ordinance o	ake all payments on time whe further notice. In order for some from court action to collede number of days in the servicit balances are refunded in the vater and/or sewer is being a SPONSIBLE FOR WATER AKE SURE All Valves & fauce are at least 18 years of age	en due as stated on the service to be restored, ct on an account will ice period. FINAL Blue applicant's name or used as long as the seER DAMAGE OR Its are turned off before.	the WATER/SEWI I will be required to be the responsibil LLS with a credit and the report owervice is not turned LOSS. Please en fore requesting w	ER bill, the department has to pay ALL DUE amounts plity of the customer. All init balance of less than \$3.00 weres will be responsible for ed off by request. HARNET insure residence or facility
FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$	Same Day	<i>U</i> \$50 — Meter Fee \$3	325 Damage \$	Other \$
Account # Transferred From:				
ACCOUNT #: CID:	LID:	_ WATERSEV	WERCRED	TT: APPROVED / DENIE

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