## **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 6.20.2025 Set	Up Fee All Accounts \$15	DEPOSITS (refunded to applicant only)		
	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
his agreement is a formal request for H	arnett Regional Water (HR	W) through normal	procedures and in a	\$100
Sewer Ordinance and all relevant department department and all relevant department of the Sewer Ordinance an	artmental policies, to provid			
OwnerX Renter (PROPER				
Applicant Email Address Permitting	Dascotgrp.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		
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 mota be refunded. Deposits and/or credit I monthly bill regardless of whether wat WATER IS NOT RESPONSIBLE FOR connection. Make sure all valves & for the greeing that you are at least 18 years of Customer Signature Share	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 un R WATER DAMAGE Of caucets are turned off befage.	en due as stated on the ervice to be restored, et on an account will be period. FINAL Be applicant's name of used, until the proper R LOSS. Please ensured wat	he WATER/SEWER I will be required to be the responsibility ILLS with a credit b only. <b>Property own</b> exty is sold or rentect sure residence or fa- ter service. By sign	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 a HARNETT REGIONAl cility is prepared for wathing this application, you a
OR OFFICE USE ONLY	//			
Customer Signature Share FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit \$ Account # Transferred From:				

Turn On:\_\_\_\_\_Unlock Only:\_\_\_\_\_Read Only:\_\_\_\_Install:\_\_\_\_\_ Customer Serv Rep: \_\_\_\_\_