Fax#910-814-4002 or upload to www.sendthisfile.com/harnett, recipient utilitybilling@ In arnett.org

HARNETT COUNTY DEPARTMENT OF PUBLIC UTILITIES

Equal Opportunity Provider and Employer

Water User's Agreement

Form Must be Completed in Full Before Service is Made Available. I.D. is Required. ***DEPOSITS BELOW APPLY TO APPROVED CREDIT ONLY***

***DEPOSITS	BELOW APPLY TO APP	ROVED	Deposit, Owner, Water	\$25 Set Up Fee,
		rees Duc.	Deposit, Owner, Sewer	\$25 all accounts: \$15
Today's Date Cont			Deposit, Rental, Water Deposit, Rental, Sewer	\$50 \$50 Met er Fee: \$70
Date Service Requested	- CPub	lie I Itilities	through normal procedure	es and in accordance with
Date Service Requested This agreement is to request the Harnett he District's Rules and Regulations, to	provide water	r service co	nnections at the following	location:
ervice Address:	11111000	Adam	E Homes (CI)	Stomer# 22896
Owner Renter (PROPE	RTY OWNER & PHONE NO.) 👲	1001	marite @ O	dams homes (c
•	V	alago	Permiswa	ANIT
Service Address: NOTTINOGO D Owner Renter (PROPERTY OWNER & PHONE NO.) APPLICANT		CO-APPLICANT		
NAME (FIRST, LAST)		NAME (FIRST, LAST)		
Amanda Allen permit coordinator				
AMANGUATER PELL	MIT CONGILIANO			
MAILING ADDRESS:	Call and	done)	DenSarola F	L.32502
MAILING ADDRESS: 100 W. Garden St	. (att. a Floor	SOCIALS	ECURITY # OR TIN	CONTACT PHONE #
SOCIAL SECURITY # OR TIN	CONTACT PHONE #	SOCIALO		
	9192336747			DATE OF BIRTH
DRIVER'S LICENSE # AND STATE	DATE OF BIRTH	DRIVER'S	LICENSE # AND STATE	DATE OF BIRTH
		EMPLOYE	ER NAME	1
EMPLOYER NAME				
Adams Homes AE	10, LLC			PHONE #
EMPLOYER ADDRESS	1	EMPLOYE	ER ADDRESS	
	91923310147			
PREVIOUS ADDRESS		PREVIOUS ADDRESS		
PREVIOUS ADDRESS		NAME OF NEAREST RELATIVE AND PHONE #		
NAME OF NEAREST RELATIVE AND PHONE #				
			D twent of D	Public Utilities Should I fail to
, the undersigned, do agree to abide by	the rules and regulations o	of the Harne	ett county Department of r	o disconnect my service without
1 11ante on time Whell tille as	Stated on the			sconnect tee — Any tees resulting
In order for service to be	Jestorea, I will be and	* * .	CONTAI DHILC III	ith a credii hallance of less man
and the set inded Property	DAMBELS ALTER DA E.		A NOW DECROMOUNT F	ETTE WATERE HAMAGE OR
1.00 will not be refunded. Property eing used, until the property is sold. OSS. Please ensure residence or fac	or rented. HARNETT C	CONDUCTION	. Make sure all valves &	faucets are turned off before
OSS. Please ensure residence of fac-	ility is prepared to			
equesting water service. By signing this application, you are agree	eeing that you are at least 18	years of ag	ge.	
by signing this application, you are agreed that the signature of the sign	u serola t	lle	n	
OR OFFICE USE ONLY EES: Set-Up Fee \$15Deposit \$_	Come Boy S	so Me	ter Fee \$70 Damage \$	Other \$
EES: Set-Up Fee \$15Deposit \$_	Same Day 5	301120		
from From		_Date To	Turn Off	
CCOUNT # CID:	_LID:	WATER	SEWERCRED	II: AFFROY ED / DENIED
Curn On: Unlock Only:	Read Only:Ins	tall:	Customer Serv Rep	-