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

			DEPOSITS (refunded to applicant only)			
Today's Date <u>11/04/2025</u>	Set Up Fee All Accounts \$15		APPROVED CREDIT DENIED CREDIT			
	Como	Day Service: \$50	OWNER WATER	\$0		\$50
	Same	Day Service: \$50	OWNER SEWER	\$0		\$50
Date Service Requested Will Call			RENTER WATER	\$50		\$100
Bute Belvice Requested 17 in Com		RENTER SEWER	\$50		\$100	
This agreement is a formal request for Sewer Ordinance and all relevant Service Address: 606 Windin	departme	ntal policies, to provid	le water and /or sew	er service connection		
Owner X Renter (PRO			RB Homes - NC	LLC/919.279.2	339	
Applicant Email Address amoss (<u>y</u> drbyrc	Jup.com				
APPLICANT			CO-APPLICANT			
NAME (FIRST, LAST)			NAME (FIRST, LAST)			
DRB Homes NC LLC						
MAILING ADDRESS:						
1101 Slater Rd. Ste. 300 D	Ourham	, NC 27703				
SOCIAL SECURITY # OR TIN	COI	NTACT PHONE #	SOCIAL SECURITY # OR TIN		CONTACT PHONE #	
DRIVER'S LICENSE # AND STATE DA		TE OF BIRTH	DRIVER'S LICENSE # AND STATE		DATE OF BIRTH	
EMPLOYER NAME			EMPLOYER NAME			
EMPLOYER ADDRESS		PHONE #	EMPLOYER ADDRESS		PHONE #	
PREVIOUS ADDRESS			PREVIOUS ADDRESS			
t, the undersigned, do agree to abide Sewer Ordinance. Should I fail to right to disconnect my service without \$40 reconnect fee. Any fees resulted in the final bills are prorated based on the service of the refunded. Deposits and/or cremonthly bill regardless of whether WATER IS NOT RESPONSIBLE connection. Make sure all valves agreeing that you are at least 18 year Customer Signature	make all put further ting from the numberedit balant water and EFOR W. & faucers of age.	payments on time when notice. In order for sea court action to collecter of days in the services are refunded in the ad/or sewer is being under the action of the services are turned off before the services are	n due as stated on the revice to be restored, to on an account will be period. FINAL Be applicant's name of sed, until the proper R LOSS. Please encore requesting wat	he WATER/SEWE I will be required to be the responsibiliant of the responsibiliant. ILLS with a creditant of the responsibility of the residence of the residence of the reservice. By signals are residence of the reservice.	ER bill, the pay AL ity of the balance of the balan	e department has the L DUE amounts plucustomer. All inition of less than \$3.00 with the responsible for NETT REGIONA prepared for water application, you are
Customer Signature FOR OFFICE USE ONLY FEES: Set-Up Fee \$15Deposit Account # Transferred From:						
ACCOUNT #: CID:	L	ID:	WATERSE	WERCRED	1T: APP	ROVED / DENIEI

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