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 11.11.25 Set Up Fee All Accounts \$15	DEPOSITS (refunded to applicant only)		
Today's Date 1111100 Set Up Fee All Accounts \$15	APPROVED CREI		EDIT DENIED CREDIT
Same Day Service: \$50	OWNER WATER	S0	S50
	OWNER SEWER	S0	\$50
Date Service Requested Will Call	RENTER WATER	\$50	2100
	RENTER SEWER	\$50	\$100
his agreement is a formal request for Harnett Regional Water (HR	W), through normal	procedures and in	accordance with the HRW
Sewer Ordinance and all relevant departmental policies, to provide			
ervice Address: TBD Thorncliff La			11.
wher X Renter (PROPERTY OWNER & PHONE NO.)		RS HOMES, L	LC Now
pplicant Email Address_tamaragreen@dreamfindersho	omes.com		
APPLICANT	CO-APPLICANT		
NAME (FIRST, LAST)	NAME (FIRST, LAST)		
DREAM FINDERS HOMES, LLC			
MAILING ADDRESS: 14701 Philips Hwy, Ste 300 Jacksonville Fla 322	56		
SOCIAL SECURITY = OR TIN CONTACT PHONE =	SOCIAL SECURITY = OR TIN CONTACT PHONE =		
910486-4864-2142			
910400-4004-2142	J		
DRIVER S LICENSE = AND STATE DATE OF BIRTH	DRIVER'S LICENSE	= AND STATE	DATE OF BIRTH
	TYPH OVER YAME		
EMPLOYER NAME	EMPLOYER NAME		
	EMPLOYER ADDRE	99	PHONE =
EMPLOYER ADDRESS PHONE =	EMPLOTER ADDRE	33	FIIOINE -
PREVIOUS ADDRESS	PREVIOUS ADDRESS		
the undersigned, do agree to abide by all rules, regulations and pewer Ordinance. Should I fail to make all payments on time whe ght to disconnect my service without further notice. In order for see \$40 reconnect fee. Any fees resulting from court action to collected final bills are prorated based on the number of days in the service to be refunded. Deposits and or credit balances are refunded in the northly bill regardless of whether water and/or sewer is being us TATER IS NOT RESPONSIBLE FOR WATER DAMAGE Of the order of the precion. Make sure all valves & faucets are turned off before eight that you are at least 18 years of age.	in due as stated on the rivice to be restored, it on an account will be period. FINAL Be applicant's name cosed, until the proper R LOSS. Please enfore requesting wat	he WATER SEWI I will be required be the responsibil ILLS with a credit only. Property ow erty is sold or rent sure residence or eer service. By si	ER bill, the department has to pay ALL DUE amounts plity of the customer. All initial balance of less than \$3.00 vers will be responsible for ted. HARNETT REGION facility is prepared for wagning this application, you
Customer Signature Tammy Gr	een		
EES: Set-Up Fee S15Deposit SSame Day S	50Meter Fee S	325Damage S	Other S
ccount # Transferred From:	Date To Turn C	Off:	
CCOUNT #: CID:LID:	WATERSE	WERCREI	OIT: APPROVED / DENIE
urn On: Unlock Only: Read Only: Inst	all:Cus	tomer Serv Rep:	