## **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

11 17 00		DEPOSITS (refunded to applicant only)				
Today's Date 11.17.25	Set Up Fee All Accounts \$15		APPROVED CR		EDIT	DENIED CREDIT
	Same	e Day Service: \$50	OWNER WATER	\$0		S50
	•		OWNER SEWER	\$0		S50
Date Service Requested Will (		all	RENTER WATER	S50		\$100
Date Service Requested 1011.	<u> </u>		RENTER SEWER	\$50		S100
his agreement is a formal request for Sewer Ordinance and all relevant of the cervice Address:	departme	ental policies, to provid	le water and /or sewe	procedures and in er service connecti LOH9 S	ons at 1	the following location:
ervice Address: (PRO						nog radige
Applicant Email Address tamara						
APPLICANT			CO-APPLICANT			
NAME (FIRST, LAST) DREAM FINDERS HOMES, LLC			NAME (FIRST, LAST)			
MAILING ADDRESS: 14701 Philips Hwy, Ste 30	0 Jac	ksonville Fla 3225	56			
SOCIAL SECURITY # OR TIN		ONTACT PHONE # 0486-4864-2142	SOCIAL SECURITY # OR TIN		CONTACT PHONE #	
DRIVER'S LICENSE # AND STATE	D.A	ATE OF BIRTH	DRIVER'S LICENSE	# AND STATE	DATE	OF BIRTH
EMPLOYER NAME			EMPLOYER NAME			
EMPLOYER ADDRESS		PHONE ≓	EMPLOYER ADDRESS		РНО	ONE #
PREVIOUS ADDRESS			PREVIOUS ADDRESS			
the undersigned, do agree to abide lewer Ordinance. Should I fail to noight to disconnect my service without \$40 reconnect fee. Any fees result not final bills are prorated based on to the refunded. Deposits and/or cremonthly bill regardless of whether VATER IS NOT RESPONSIBLE onnection. Make sure all valves greeing that you are at least 18 years.	nake all it further ing from he numb dit balar water a FOR W & fauce s of age.	payments on time wher notice. In order for seen court action to collected or of days in the service of days in the service are refunded in the nd/or sewer is being used to the sare turned off before the same turned off before the sare turned off before the same turned off before the same turned of the	n due as stated on the rvice to be restored, at on an account will be period. FINAL Bis applicant's name of sed, until the proper R LOSS. Please ensure requesting wat	ne WATER/SEWH I will be required be the responsibil ILLS with a credit nly. Property ow orty is sold or rent sure residence or er service. By si	ER bill. to pay a ity of t balance ners w ted. Ha facility gning t	the department has the ALL DUE amounts plus the customer. All inition of less than \$3.00 will be responsible for ARNETT REGIONA is prepared for wat this application, you a
Customer Signature FOR OFFICE USE ONLY TEES: Set-Up Fee \$15Deposit	s	Same Day S	50 Meter Fee S			Other S
Account # Transferred From:						
ACCOUNT #: CID:	I	LID:	WATERSE	WERCREE	OIT: Al	PPROVED / DENIE
Turn On:Unlock Only:	R	Read Only:Inst	all:Cust	tomer Serv Rep:		