## Lowcountry Regional Water System

513 Elm St West Hampton, SC 29924

## **CUSTOMER ACCOUNT BANK DRAFT APPLICATION FORM**

Phone: 803-943-1006

DATE OF APPLICATION	
CUSTOMER NAME	
WATER ACCOUNT NUMBER	
SERVICE ADDRESS	
DAYTIME TELEPHONE NUMBER	
NAME OF BANK	
BANK ADDRESS	
BANK ROUTING TRANSIT NUMBER (RTN) (FIRST 9 DIGITS ON BOTTOM OF CHECK)	
(i mor o ziemo on zerrem er enzeny	
CUSTOMER BANK ACCOUNT NUMBER (MIDDLE SET OF NUMBERS ON BOTTOM OF CHECK)	
(MIDDLE SET OF NOMBERS ON BOTTOM OF CHECK)	
CUSTOMER SIGNATURE	
CUSTOWIER SIGNATURE	

## **RETURN THIS FORM WITH A "VOID" CHECK TO:**

LOWCOUNTRY REGIONAL WATER SYSTEM BILLING DEPARTMENT 513 ELM ST WEST HAMPTON, SC 29924

ONCE RECEIVED, PAYMENT WILL BE DRAFTED THE FOLLOWING MONTH.