

**LOWCOUNTRY REGIONAL WATER SYSTEM**

**513 Elm St West, Hampton, SC 29924 | Phone: 803-943-1006**

**WATER / SEWER ACCOUNT BANK DRAFT PAYMENT APPLICATION**

Date of Application \_\_\_\_\_

Name of Bank \_\_\_\_\_

Bank Address \_\_\_\_\_

Bank Routing Transit Number (RTN) \_\_\_\_\_

Customer Bank Account Number \_\_\_\_\_

Water Account Number \_\_\_\_\_

Service Address \_\_\_\_\_

Daytime Telephone Number \_\_\_\_\_

Customer Signature \_\_\_\_\_

Print Name \_\_\_\_\_

*Return this completed form with a "VOID" check to  
Lowcountry Regional Water System Billing Department  
513 Elm St West Hampton, SC 29924  
Or email [customerservice@lowcountrywater.com](mailto:customerservice@lowcountrywater.com)*

