



Dear York County Water & Sewer Customer:

Below you will find the application for water and sewer service. This application may be completed and mailed or delivered with payment by cash or check to our Heckle Blvd office. You may reach this office by driving south on I-77 to exit 82B. Turn right on Cherry Rd and drive several miles until Cherry Rd. narrows down to two (2) lanes. Go the next stoplight, Heckle Blvd., and turn right. The York County Complex will be about ¼ mile from light on your right. Upon turning into the complex, we are in the first building on the left, inside the tax office beside the SCDMV. **Please note that at this time we are not able to accept payment by debit or credit card, or by phone.**

We would like to take this opportunity to tell you about our billing cycle. Water meters are read at the last two (2) weeks of each month and bills are mailed no later than the 15<sup>th</sup> of the following month. You then have until the end of the month to pay the bill without penalty. Any payment not received in our office by the last day of the month will result in a 1.5% penalty. Late notices are mailed around the 4th business day of the month. Any past due amount greater than \$10, which is not received within 23 days after the due date, will be subject to disconnection. At that time, the entire balance due must be paid along with a \$50 reconnect fee before service is restored. Once your account is established, you may pay your regular monthly bills with a credit or debit card on our website, [www.yorkcountygov.com](http://www.yorkcountygov.com).

You may elect to sign up to have your bill automatically drafted from your checking account at any time while you are a customer. This form is also located below the application. **You must attach a voided check to this application and either mail it or drop it off at our Heckle location.** We can only draft from a checking account in the same name as the water and sewer account.

We would also like to take this opportunity to tell you about irrigation meters. An irrigation meter is used to determine how much water is used outdoors that does not enter our sewer system. To obtain an irrigation meter you will need to complete an application and mail it to this office along with a \$550.00 tap fee and a \$30.00 activation fee. If you request an irrigation meter within six (6) months of the time new service begins, the \$30 activation fee will be waived. A double check valve must be installed at your expense within 30 days of installation of the meter. This valve must be inspected annually at your expense by a certified inspector. If you have a sprinkler system or plan to water your yard a great deal, you may want to consider an irrigation meter.

Please let us know if we can ever be of any assistance to you. You may reach me at 803.327.8639 or 803.628.3211 if you have any additional questions or concerns. The numbers for our Heckle Boulevard office are 803.909.7280 or 803.909.7275.

Thank You,  
Theresa Jenkins  
Office Coordinator/Billing Clerk  
York County Water & Sewer

**YORK COUNTY WATER & SEWER APPLICATION**

803.327.8639 / 803.628.3211 / 803.909.7280 / 803.909.7275

*Please mail or deliver this application and check for the total due to:  
1070 Heckle Blvd., Suite 101, Box 10 Rock Hill, SC 29732*

**PAYMENT MUST BE RECEIVED WITH APPLICATION BEFORE SERVICE CAN BE TRANSFERRED**

IF YOU NEED SERVICE IMMEDIATELY, PLEASE APPLY IN PERSON AT 1070 HECKLE BLVD.

**NAME TO APPEAR ON ACCOUNT:** \_\_\_\_\_

**ADDRESS FOR SERVICE:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**MAILING ADDRESS (IF DIFFERENT):** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**TELEPHONE NUMBER: ( ) \_\_\_\_\_ E-MAIL:** \_\_\_\_\_

**DATE SERVICE DESIRED:** \_\_\_\_\_

\* SERVICE APPLYING FOR: WATER\_\_\_ SEWER\_\_\_ IRRIGATION\_\_\_

REFUNDABLE DEPOSIT FOR WATER SERVICE \$ 50.00

REFUNDABLE DEPOSIT FOR SEWER SERVICE \$ 50.00

ACTIVATION FEE \$ 30.00

**TOTAL \$ 130.00**

**I HAVE RECEIVED A COPY OF THE CURRENT WATER RESTRICTIONS FOR YORK COUNTY WATER/SEWER & AGREE TO COMPLY WITH THESE RESTRICTIONS OR I MAY BE FINED ACCORDING TO THE DROUGHT ORDINANCE.**

**APPLICANT SIGNATURE\*\*** \_\_\_\_\_

**If this is a joint account, both parties must sign this application.**

Applicant hereby agrees to adhere to the York County Water & Sewer ordinance and policies

**\*\*Applicants applying for irrigation service agree to have a Double Check Valve installed within 30 days of installation.**

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\*FOR OFFICE USE ONLY

Payment Method \_\_\_\_\_ Amount Received \_\_\_\_\_

Received By: \_\_\_\_\_ DATE \_\_\_\_\_

APPROVED \_\_\_\_\_ DATE \_\_\_\_\_

**AUTHORIZATION AGREEMENT FOR DIRECT PAYMENTS (ACH DEBITS)**

Company

Name York County Water and Sewer

I (we) hereby authorize York County Water and Sewer, hereinafter called COMPANY, to initiate debit entries to my (our) Checking Account indicated below at the depository financial institution named below, hereinafter called DEPOSITORY, and to debit the same to such account. I (we) acknowledge that the origination of ACH transactions to my (our) account must comply with the provisions of U.S. law.

Depository

Name \_\_\_\_\_

Routing

Number \_\_\_\_\_

Account

Number \_\_\_\_\_

This authorization is to remain in full force and effect until COMPANY has received written notification from me (or either of us) of its termination in such time and in such manner as to afford COMPANY and DEPOSITORY a reasonable opportunity to act on it.

Name(s) \_\_\_\_\_ York County Water and Sewer  
(Please Print) Account Number \_\_\_\_\_

Date \_\_\_\_\_ Signature \_\_\_\_\_

**YOU MUST ENCLOSE A VOIDED CHECK  
TO ACTIVATE A BANK DRAFT.**

Draft forms will be returned if voided check is not enclosed. Draft must be from checking account in same name as water and sewer account. Draft will begin approximately two (2) months after form is received. Any adjustments to your account may not be reflected until your next bill. Payment block on bill will state 'PAID BY DRAFT' once draft is in effect.

***Please mail the completed form to:***

***1070 Heckle Blvd., Suite 101, Box 10 Rock Hill, SC 29732.***

Please call (803) 327-8639 or (803) 628-3211 if you have any questions.