



Service Line Protection Enrollment

Georgetown County Water and Sewer District
Telephone: (843) 546-8408 / Fax: (843) 546-5836

Please submit the completed form to: customerservice@gcwsd.com

Or mail to: P.O. Box 2748, Georgetown, SC 29442

GCWSD Customer Account Number (as it appears on bill): _____

Name (as it appears on bill): _____

Service Address: _____
Street

City State Zip Code

Email Address: _____

I would like to enroll in the following Service Line Protection:

☐ Water Only (\$2.00/month)

☐ Sewer Only (\$4.00/month)

☐ Water & Sewer (\$6.00/month)

* Each additional REU (Residential Equivalent Unit) \$0.50/month

Terms and Conditions are available at GCWSD.com. By signing this form, you acknowledge that you agree to the terms and conditions of this program. Protection begins immediately, no pre-existing conditions will be covered. Program effective July 1, 2021. Coverage begins after the service is added to your account.

Signature

_____/_____/_____
Date

For additional forms or program information, please visit our website at:
www.gcwsd.com/service-line-protection-program