

210898



134 South Main Street
Halifax, Virginia 24558-0640

Days of Operation Mon - Fri 8:30 am - 5:00 pm
Office phone 434-476-4272
Fax 434-476-3384
After Hours & Emergencies 434-222-7798
Email: customerservice@hcsa.us

Your Current
Billing Address is
Located Here.

SERVICE ADDRESS					Your Physical Service Address is Here.
SERVICE	PREVIOUS READING	CURRENT READING	READ DATE	CONSUMPTION	
1100	897700	897700	02/16/2010	0	

DETAIL OF CHARGES	
SERVICE PERIOD	12/04/2009 - 02/16/2010
SERVICE DESCRIPTION	AMOUNT
WATER BASE CHARGE	\$6.00
WATER - SO BO IN TOWN	\$0.00
SEWER - SO BO IN TOWN	\$33.00
LAND FILL BI-MONTHLY	\$6.00
TOTAL CURRENT CHARGES	\$45.00

YOUR USAGE HISTORY	
CURRENT MONTH	0
LAST MONTH	20

ACCOUNT NUMBER	522391
BILLING DATE	02/28/2010
BALANCE FORWARD	\$0.00
CURRENT CHARGES	\$45.00
TOTAL DUE	\$45.00
DATE DUE	03/22/2010
Amount due if paid after 5:00 pm on due date (includes late fee)	\$49.50
Amount due if paid after 5:00 pm on cut-off date (includes late & non-payment fee)	\$89.50

FAILURE TO RECEIVE BILL DOES NOT EXCUSE RESPONSIBILITY FOR PAYMENT

IMPORTANT INFORMATION

Please pay your bill by March 22 to avoid paying a penalty. If not paid by 5 P.M. on March 31, a \$ 40 non payment fee will be added and service may be disconnected.

You may now pay your bill with credit cards through Official Payments Corporation. You may pay by phone or online.

Please visit our website @ www.hcsa.us for details.

Please send either a check or money order with the payment stub in pre-addressed envelope provided. Payments may be made at the County Administration Building - 134 South Main Street in the Town of Halifax between the hours of 8:30 am & 5:00 pm Monday- Friday and after hours in the drop box located beside the main entrance. Do not place cash in the after hours drop box. The Authority is not responsible for lost cash. After hours payments are applied to your account on the next business day.

Visit us on the web at - www.hcsa.us

PLEASE DETACH AND RETURN BOTTOM PORTION IF PAYING BY MAIL. PLEASE DO NOT STAPLE OR FOLD. PLEASE WRITE YOUR ACCOUNT NUMBER ON YOUR CHECK.



210898

PO Box 640
HALIFAX VIRGINIA 24558-0640

RETURN SERVICE REQUESTED

BILL DATE	ACCOUNT NUMBER	DATE DUE
02/28/2010	522391	03/22/2010
SERVICE ADDRESS		TOTAL DUE
1325 SHEPHERD ST		\$45.00
Amount due if paid after 5:00 pm on due date (includes late fee)		\$49.50
Amount due if paid after 5:00 pm on cut-off date (includes late & non-payment fee)		\$89.50

Amount Enclosed \$

Please remit and make checks in US funds payable to:

HCSA
PO BOX 640
HALIFAX VIRGINIA 24558-0640

Your Current
Billing Address is
Located Here.

