

Remittance advice form

Payment details

Customer details

Method of payment *(online/BACs/cheque)*

Date of payment

Total payment

Customer account number

Invoice number (if applicable)

Amount to be allocated (£)

| <i>Customer account number</i> | <i>Invoice number (if applicable)</i> | <i>Amount to be allocated (£)</i> |
|--------------------------------|---------------------------------------|-----------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |

Once complete, please return this form to us by email to: payments@castlewater.co.uk, or by letter to: Payments Team, Castle Water Limited, 1 Boat Brae, Rattray, Blairgowrie, PH10 7BH.